

# Fairfax County Veterans Treatment Docket Program Referral

Database

- To be completed by any person/ agency who has identified a potential participant for the Fairfax Veterans Treatment Docket (VTD). Complete as much as is known.
- Submit referral to VTD Coordinator Brooke Postlewaite (via email or drop off to Courthouse; Suite 214)
- Questions? Contact Brooke Postlewaite, 703-246-2592, or Brooke.Postlewaite@fairfaxcounty.gov

Person making referral: \_\_\_\_\_ Date: \_\_\_\_\_

Person making referral is a:

- |  |  |
|--|--|
| <input type="checkbox"/> Magistrate                          | <input type="checkbox"/> Probation Officer Pre-trial |
| <input type="checkbox"/> Court Services Evaluator            | <input type="checkbox"/> Judge                       |
| <input type="checkbox"/> Law Enforcement Officer             | <input type="checkbox"/> Client (self-referral)      |
| <input type="checkbox"/> Veteran Justice Outreach Specialist | <input type="checkbox"/> Other: _____                |
| <input type="checkbox"/> Attorney                            |  |

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Veteran Name: \_\_\_\_\_ Phone \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

City/State of Residence \_\_\_\_\_

Attorney: \_\_\_\_\_ Phone \_\_\_\_\_

Served in: ARMY USMC NAVY AIR FORCE COAST GUARD NATIONAL GUARD RESERVES

Discharge Status: \_\_\_\_\_ Time of service: \_\_\_\_\_

If known, are they eligible and/or enrolled in VA services? YES NO

Case #s and Pending Charges: **GDC JDR CIRCUIT (circle one)**

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Race (check only one)

- White
- Black or African American
- Asian
- American Indian or Alaska Native
- Pacific Islander or Native Hawaiian
- Multiracial
- Unknown
- Other

Ethnicity (check only one)

- Hispanic or Latino/a
- Non-Hispanic or Latino/a
- Unknown

Gender (check only one)

- Male
- Female
- Unknown