STATE OF MICHIGAN COUNTY

PETITION FOR CONTINUED COMMITMENT JUDICIAL CIRCUIT COURT FOR TREATMENT OF INFECTIOUS DISEASE AND ORDER TO RECONVENE

CASE	N	O
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	COMMITMENT REVIEW PAI	NEL	
In the matter of			
1. I am director of the			
Name of facility			
	ommitted to this facility for a period of		
dated	commitment for the following reasons:		
The individual requires continued c	ommitment for the following reasons:		
	order to continue commitment of the in	dividual at the above na	med facility for a period of
Number of days or months and	under the conditions set by the court.		
	amined by me and that its contents are	e true to the best of my ir	nformation, knowledge, and
Date			
Signature of director	Address		
Name (type or print)	City, state, zip	р	Telephone no.
	ORDER		
1. Date of Hearing:	Judge:		
IT IS ORDERED: 2. The previously appointed commitment	nent review panel consisting of		,
	, and		
 The panel shall do the following: a. Review the petition and any other b. Interview the individual, or docur 	ourt in writing within 14 days of the filir er information considered relevant by t ment the reasons why the individual w either termination or continuation of th	the commitment review pras not interviewed.	
Date	Judge		
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Do not write below this line - For court use only