Homestead Medical Experts INTAKE FORM / AGREEMENT FOR RETENTION EVALUATION

DEFENDANT INFORMATION							
First Name		DEFEND		l			
				Name of person hiring HME:			
Last Name				Relationship to defendant:			
Age:				Phone number:			
Current address:				Special needs/instructions:			
City/State/Zip				Defenda	lant: History of Violence?		[] YES [] NO
CHARGE/OFFENSE/PRISON INFORMATION							
Charge for Arrest:				Date of Arrest:			
imprisoned at:				Prison /Facility Phone number		er	
visiting privileges for interview?		[] YES [] NO Date being seen by judge:					
COLLATERAL PERSON(S) INFORMATION							
First/Last Name				Phone			
Address				Fax			
City, State ZIP Code				E-mail			
First/Last Name				Phone			
Address				Fax			
City, State ZIP Code				E-mail			
First/Last Name				Phone			
Address				Fax			
City, State ZIP Code				E-mail			
First/Last Name				Phone			
Address				Fax			
City, State ZIP Code				E-mail			
PAYMENT							
				Expiration:			
Card Type:	ard Type: [] VISA [] AMEX [] MC [] DISCOVER				Card security #:		
Card Number:			Signature:				
AGREEMENT							

Homestead Medical Experts (HME) is being hired to conduct a retention evaluation by a licensed social worker. By signing below the defendant and responsible party understands and agrees to allow the Homestead Medical Experts professional conducting the biopsychosocial exam and risk assessment to speak with the identified collateral contact(s) indicated above, as well as with the defendant's attorney. The collateral contact(s) will be interviewed as needed via telephone. There will be three attempts made to interview any collateral contact(s). The normal report time is 36-48 hours. Certain circumstances may prevent the completion of the report within the normal time frame such as: defendant is incapable of doing the interview (i.e.: intoxication, medical/psychiatric issue, or in isolation due to aggressive behavior) and any instance where the Homestead Medical Expert professional feels reasonably unsafe. Homestead Medical Experts is being hired by the defense attorney so that all work done by Homestead should be considered attorney work product and handled with Attorney Client Privileges. Cost of standard eval is \$1,995.00. Non-emergent BPS \$1,500.00. Additional services not provided with standard eval: In-person collateral interviews will be billed at \$300/hour. Other in-court appearances will be billed at \$350/hour. Finalized reports will be sent only to the attorney hiring Homestead Medical Experts.

TO SUBMIT FORM: PLEASE FAX TO (888) 974-0184 OR email to seth@homesteadexperts.com

