

Killarney Apartments
#103, 1920-29th Street S.W.
Calgary, Alberta T3E 2J8
Phone & Fax: (403) 242-7740

**COMMUNITY
LAMDA**



Mission Lamda House
#100, 316-20th Avenue S.W.
Calgary, Alberta T2S OE5
Phone & Fax: (403) 228-2625

Please Print All Information

Referral Form

Date of Referral _____ Referral Agency _____
month/day/year

Client Name _____ Person Referring _____

Date of Birth _____ Sex _____ MALE _____ FEMALE

Psychiatrist _____ Phone _____

G.P. _____ Phone _____

Community Workers _____ Phone _____

Diagnosis: Axis I _____ Axis II _____

Other medical conditions _____

Medications: _____

Compliance with Medication: _____

Behaviour Difficulties (Violence, Arson, Legal, Street Drugs, Alcohol): _____

ADL Skills/Difficulties (please comment on each one)

Cooking: _____

Cleaning: _____

Budgeting: _____

Personal Hygiene: _____

Time/Leisure Management: _____

Source of Financial Support: _____

_____ AISH _____ Social Assistance _____ Public Trustee

_____ Old Age _____ CPP _____ Own Funds _____ Other

Current Living Accommodations (please explain): _____

_____ Smoker _____ Non-Smoker

Any habits a roommate should be aware of? _____

Emergency Notification _____

Comments: _____

Further referral information will be completed with Community LAMDA staff