

Tallaght Rehabilitation Project CLG

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Tallaght Rehabilitation Project

"Providing drug and alcohol rehabilitation services within the community"

Referral Form for Day Programme

Date of Referral:		Client Name	
Date of Birth		Client contact number	
Client address			
Client Eircode		Is client aware of referral	
Referring agency name and address			
Referring agency contact details:			
Keyworker/Counsellor		Referring worker:	
Other Agencies involved			

Please indicate duration of drug/alcohol free status

1 Month	3 months	6 Months	12 Months	Longer
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Section B - Medical Information

N.B if a person you are referring is on any medications; the prescribing doctor must complete the following

Please indicate current status of client

On Methadone Maintenance	Prescribed Benzodiazepines	Alcohol	Other	Drug free

Please indicate duration of present stability

3 Months	6 Months	12 Months	Longer
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Section C – Community Employment Time

Has the client had any previous Community employment time, if so how long?

Other relevant information

Signed:

Date:

Company Registration No. 292608
Established since 1997

CRN 20044060
CHY 13829

Tallaght Rehabilitation Project CLG is kindly assisted and supported by the following Irish Government Agencies



An Roinn Coimirce Sóisialaí
Department of Social Protection

