**Absconded Person**

**Under the Jurisdiction of the Psychiatric Security Review Board**

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| In the matter of:  |
| ***Enter name of person under the jurisdiction of the Board***Date of Birth: *Enter person’s date of birth* |
| A person under the jurisdiction of the Psychiatric Security Review Board |
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1. Pursuant to ORS 161.336(4)(a)(A)(iii), I, *Enter Author Name and Credentials*, of *Enter Agency Name*, the PSRB Community Mental Health Program Director or Designee ordered by the Psychiatric Security Review Board to provide the supervision and monitoring of *Enter Person’s Name*’s conditional release, issue this order for the return of *Enter Person’s Name* to the location identified in paragraph 5.
2. On *Enter Date*, I reported to *Enter Peace Officer Name*, a peace officer of *Enter Law Enforcement Agency*, Oregon, Badge #*Enter Badge Number* that the above-named person has absconded from *Enter person’s address*, the residence established in *Enter Person’s Name*’s PSRB Conditional Release Order, on *Enter Date Absconded*.
3. Further, I, *Enter Author Name*, attest to the following **(Complete At Least One Option)**:

[ ]  *Enter Person’s Name* has violated the terms of their conditional release as evidenced by: *Enter Narrative if applicable*

[ ]  The mental health of *Enter Person’s Name* has changed such that I reasonably believe that the person may no longer be fit for conditional release as evidenced by: *Enter Narrative if applicable*

1. The whereabouts of *Enter Person’s Name* are (**Choose One)**:

[ ]  **Known**: I directed *Enter Peace Officer Name*, a peace officer of *Enter Law Enforcement Agency*, Oregon, Badge #*Enter Badge Number* to take *Enter Person’s Name*, into custody at *Enter Time* a.m., on the *Enter Day* day of *Enter Month*, *Enter Year* in *Enter County* County, Oregon, and requested *Enter Person’s Name* be taken to the location identified in paragraph 5.

[ ]  **Unknown**: I informed *Enter Peace Officer Name*, a peace officer of *Enter Law Enforcement Agency*, Oregon, Badge #*Enter Badge Number* of the following: *Enter Person’s Name* was last seen at *Enter Last Known Location*. *Provide as much detail as possible as to where the person was last seen, where they might be headed, and the circumstances leading up to discovering the person was missing*.

1. Pursuant to ORS 161.336(4)(a)(C), this written order serves as sufficient warrant for any law enforcement officer to take *Enter Person’s Name* into custody and transport to (**Choose One**):

[ ]  Oregon State Hospital, Salem at 2600 Center Street NE, Salem, OR 97301

[ ]  *Enter address of transport location*

As the PSRB Community Mental Health Program Director or Designee, I attest to the following:

[ ]  I have contacted the Executive Director of the Psychiatric Security Review Board.

[ ]  The Executive Director of the Psychiatric Security Review Board supports this written order.

[ ]  I have arranged with the receiving facility that this person will be transported to them.

Attach to Report:

[ ]  Conditional Release Order(s)

[ ]  Agreement to Conditional Release

[ ]  A recent photograph of the absconded person if whereabouts are unknown

Submit this Report to the Following:

* The receiving facility (OSH: Contact 503-945-2800 and ask for an email)
* The law enforcement agency(ies) involved with this report and/or transport
* psrb@psrb.oregon.gov

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Signature:

Print Name: *Enter Full Name* Date: *Enter Date Signed*