IN THE CIRCUIT COURT OF THE

STATE OF OREGON

FOR _____ COUNTY

In the Matter of	)	
	)	**REQUEST AND ORDER**
	)	**APPOINTING**
_____,)		**ONE EXAMINER**
an allegedly mentally ill person	)	

TO THE JUDGE OF THE ABOVE COURT:

The undersigned, _____, requests the appointment of _____.

( ) competent psychiatrist having completed an approved residency in psychiatry and licensed by the State Board of Medical Examiners for the State of Oregon to practice medicine and surgery, or

( ) a qualified mental health examiner recommended by the Mental Health and Developmental Disability Services Division, State of Oregon,

to examine the above-named alleged mentally ill person as to said person's mental condition.

DATED the ____ day of _____, 20____.

_____
(Name)

_____
(Relationship)

IT IS SO ORDERED:

_____
Judge