



Supportive Case Management Referral Form

Lowell House Addiction Treatment and Recovery has Case Managers available to provide support services to young men and women ages 18+ who are in recovery from addiction and residing in the Greater Lowell area.

Complete this Referral Form and submit to Victoria Nesto, Supportive Case Manager

Fax: 978-937-2559 or email to vnesto@lowellhouseinc.org.

Any questions please contact Lowell House at 978-459-8656

Name	
Phone Number	
Email	
Current Address	
D.O.B.	

Please answer the following:

1. Date of last use: _____
2. Do you participate in self-help? _____ How often? _____
3. Do you have a Substance Use Diagnosis? _____ If so, please identify: _____
4. Do you need assistance navigating systems? yes no sometimes
5. Are you currently: in school working treatment program other: _____
6. Reason for Referral: _____

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