PROBATE COURT OF \_\_\_\_\_ COUNTY, OHIO

\_\_\_\_\_, JUDGE

IN THE INTEREST OF: \_\_\_\_\_

CASE NO.

## **RESPONDENT'S RIGHTS** [R.C. 5119.95]

- 1. You are hereby notified that on \_\_\_\_\_\_, a petition was filed in the \_\_\_\_\_\_ County, Ohio, Court of Common Pleas, Probate Division, alleging that you:
  - suffer from alcohol and other drug abuse;
  - present an imminent danger or imminent threat of danger to self, family, or others as a result of alcohol and drug abuse, or there exists a substantial likelihood of such a threat in the near future; and
  - can reasonably benefit from treatment.
- 2. You have the right to:
  - 1. BE NOTIFIED AND BE PRESENT AT HEARING to determine whether or not you are in need of involuntary treatment for alcohol and other drug abuse by Court order.
  - 2. RETAIN A PHYSICIAN for the purpose of a physical examination and a qualified health professional for the purpose of a drug and alcohol assessment at your own expense.
  - 3. RETAIN COUNSEL if you are unable to afford an attorney, you will be represented by Court-appointed counsel.
  - 4. Make immediately a REASONABLE NUMBER of telephone calls or use other means to contact an attorney, physician, or a qualified health professional, or to contact some other person or persons to secure representation by counsel if you are hospitalized pending the hearing.