

**Homestead Medical Experts
INTAKE FORM / AGREEMENT FOR RETENTION EVALUATION**

DEFENDANT INFORMATION

First Name		Name of person hiring HME:	
Last Name		Relationship to defendant:	
Age:		Phone number:	
Current address:		Special needs/instructions:	
City/State/Zip		Defendant: History of Violence?	<input type="checkbox"/> YES <input type="checkbox"/> NO

CHARGE/OFFENSE/PRISON INFORMATION

Charge for Arrest:		Date of Arrest:	
imprisoned at:		Prison /Facility Phone number	
visiting privileges for interview?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Date being seen by judge:	

COLLATERAL PERSON(S) INFORMATION

If additional spaces are needed, please print another copy of this sheet and send both.

First/Last Name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
First/Last Name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
First/Last Name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
First/Last Name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	

PAYMENT

			Expiration:	
Card Type:	<input type="checkbox"/> VISA <input type="checkbox"/> AMEX <input type="checkbox"/> MC <input type="checkbox"/> DISCOVER		Card security #:	
Card Number:			Signature:	

AGREEMENT

Homestead Medical Experts (HME) is being hired to conduct a retention evaluation by a licensed social worker. By signing below the defendant and responsible party understands and agrees to allow the Homestead Medical Experts professional conducting the biopsychosocial exam and risk assessment to speak with the identified collateral contact(s) indicated above, as well as with the defendant's attorney. The collateral contact(s) will be interviewed as needed via telephone. There will be three attempts made to interview any collateral contact(s). The normal report time is 2-3 days. Certain circumstances may prevent the completion of the report within the normal time frame such as: defendant is incapable of doing the interview (i.e.: intoxication, medical/psychiatric issue, or in isolation due to aggressive behavior) and any instance where the Homestead Medical Expert professional feels reasonably unsafe. Homestead Medical Experts is being hired by the defense attorney so that all work done by Homestead should be considered attorney work product and handled with Attorney Client Privileges. Cost of standard eval is \$1,995.00. Non-emergent eval \$1,500.00 (7-10 days). Additional services not provided with standard eval: In-person collateral interviews will be billed at \$300/hour. Other in-court appearances will be billed at \$350/hour. Finalized reports will be sent only to the attorney hiring Homestead Medical Experts.

TO SUBMIT FORM: PLEASE FAX TO (888) 974-0184 OR email to info@homesteadexperts.com



HOMESTEAD MEDICAL EXPERTS
(732) 743-8003