



**Veterans Treatment Court  
Tulsa County District Court  
REFERRAL FORM**

Age: \_\_\_\_\_ Gender:  Male  Female

Marital Status:  Single  Married  Divorced  Widowed

Are you Native American?  Y  N If yes, what tribe? \_\_\_\_\_

**MILITARY SERVICE**

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Branch of Service:

Army  Navy  Marines  Air Force  Coast Guard  Reserve  
 Air National Guard  Army National Guard

Dates of Service:

From \_\_\_\_\_ To \_\_\_\_\_

Type of Discharge: \_\_\_\_\_

Have you served in a combat zone?  Y  N

If yes, where did you serve? \_\_\_\_\_

Do you receive services from the US Department of Veterans Affairs?  Y  N

**EDUCATION**

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High School Diploma  GED  College Graduate  Vocational Training