SAMHSA Mini-LOCATOR FORM

SOS providers may complete the SAMHSA Mini-Locator Form when in the field and/or do not have access to the full locator form. Retain this data for future local reference. Download and use the Gift Card Order Form to collect gift card delivery information and enter that data in iPortal.

Name: _____

Nickname: _____

Current Address: _____

Current Phone Number: _____

Cell Phone Number: _____

E-mail Address: _____

Other E-mail Address: _____

Best person to contact if we need to find you?

Name: _____

Phone: _____

Address: _____

Where do you hang out?

_____

_____

If you needed to move, who would you live with?

_____

_____

Is there anyone else we could contact if we needed to find you? (P/O, counselor, etc.)

_____

_____