

# GEMEINSCHAFT REFERRAL/APPLICATION

1423 Mount Clinton Pike Harrisonburg, VA 22802

Phone: 540-434-1690 Fax: 540-432-9479

Referral date: FROM: NAME: TITLE: LOCATION:

Offenders Name: Number:

Release Date:

Current Offenses:

Prior Offenses:

Are there any mental health issues? Yes  No  If yes, please explain. If the offender is currently receiving mental health services please attach a statement from mental health staff including diagnosis, medications, any special needs that would need to be considered.

Are there any medical issues? Yes  No  If yes please explain. If the offender has any medical needs please attach a statement from medical staff including diagnosis, medications, special needs that would need to be considered.

How long has the offender been housed at current institution?

Briefly describe the offender's institutional behavior including institutional charges, behavior in the housing unit, etc.:

Is the offender currently employed? Yes  No

What programs has the offender completed or currently attending:

Are there any individuals with whom the offender should not have contact? Yes  No  If yes, please list the names:

I acknowledge that I am responsible for all bills associated with medical care while at the Gemeinschaft.

\_\_\_\_\_  
Offender's Signature

\_\_\_\_\_  
Date

I acknowledge and fully understand that District 39 will provide 90 days of Courtesy Supervision while I participate in the Gemeinschaft program. Once I complete the program I will be required to return to the district in which I have a probation obligation.

\_\_\_\_\_  
Offender's Signature

\_\_\_\_\_  
Date

**Once the referral form has been fully completed, the referral form, a copy of a physical/TB test within last 6 months prior to release, and PSI/Criminal History information is obtained, please fax or mail all of the requested documents to BOTH Gemeinschaft and Tessie Lam—address below. Gary Wagner and Julia Linkenhoker will need to be emailed a copy of the referral form only.**

**Gemeinschaft  
1423 Mount Clinton Pike  
Harrisonburg, VA 22802  
Fax: 540-432-9479**

**Chief Tessie Lam  
District 39 Probation & Parole  
30-A West Water Street  
Harrisonburg, VA 22801  
Fax: 540-433-3315**

[Gary.Wagner@vadoc.virginia.gov](mailto:Gary.Wagner@vadoc.virginia.gov) and [Julia.Linkenhoker@vadoc.virginia.gov](mailto:Julia.Linkenhoker@vadoc.virginia.gov)