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|  | KriminalomsorgenTelemark fengsel, Skien avdeling |

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| **Søknadsskjema for Rusmestringsenheten, RME**Telemark fengsel, Skien avdeling |

**Navn:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Alder:** \_\_\_\_\_\_\_\_\_\_\_

**Domslengde:** \_\_\_\_\_\_\_\_\_\_\_ **Domskategori:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Permtid:**\_\_\_\_\_\_\_\_\_\_\_ **2/3 tid:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Endt tid:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Litt om deg** (bosted, boforhold, nettverk, utdanning, jobberfaring, interesser, evt diagnoser)

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**Kort om rusmiddelproblemet** (varighet og bruk av type rusmidler, eventuelt også bruk av legemidler):

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**Har du tidligere søkt hjelp for rusmiddelproblemet** (fra kommunen, spesialisthelsetjenesten, evt andre)

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**Begrunnelse for søknaden:**

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**Hvilke rolle tar du i en gruppe?** (hva kan RME forvente av deg)

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**Ønsker for oppholdet på RME:**

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Dato og signatur:

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*Takk for din søknad, du hører fra oss ☺*

**SAMTYKKEERKLÆRING**

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| Jeg gir herved Sykehuset Telemark DPS, som er en del av Rusmestringsenheten i Telemark fengsel avd. Skien, samtykke til å innhente nødvendig informasjon fra min journal, for å kunne vurdere inntak ved RME. Samtykket opphører etter endt søkeprosess og kan når som helst trekkes tilbake.Kryss av: Ja  Nei Følgende steder kan det innhentes opplysninger fra:\*……………………………….(Dersom det er flere aktuelle steder, må det skrives et samtykke til hvert sted. Ta evt kopi). |
| **NAVN (blokkbokstaver):** | **FØDSELSDATO: *(11 siffer)*** |
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| **UNDERSKRIFT:** | **DATO:** |
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