

CASE NO. \_\_\_\_\_

THE STATE OF TEXAS

§ IN THE \_\_\_\_\_ COURT

v.

§

§

OF

§

§ FORT BEND COUNTY, TEXAS

**MOTION FOR SUBSTANCE ABUSE EVALUATION BY BEHAVIORAL HEALTH SERVICES OF FORT BEND COUNTY**

- The Court, on its own motion,
- The State of Texas by and through an Assistant Fort Bend County District Attorney,
- The Attorney for the Defendant, has reason to believe the Defendant is suffering from a substance abuse disorder and an examination is needed to assess functioning, diagnostic impressions, and treatment recommendations. This motion is based on the following behaviors:

**(Check all that apply)**

- Substance abuse history*
- Positive Toxicology Screenings*
- Criminal allegation/charge is substance related*
- Other: \_\_\_\_\_*

**Please describe specific concerns below:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Required: **(Check one)**

- I have records regarding the defendant's history that are pertinent to the requested evaluation and I will make them available to the examiner.
- I do not have records available regarding the defendant's history.

Therefore,

- The State of Texas by and through an Assistant Fort Bend County District Attorney,
  - The Attorney for the Defendant,
- prays that this Court will issue an order permitting an examination by a disinterested expert in the field of chemical dependency who can examine the defendant and report to the Court on the findings of the defendant and testify as may be required.

Respectfully submitted this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Attorney for Defendant/State of Texas