



WRITTEN REQUEST FOR RELEASE
NORTH DAKOTA SUPREME COURT
 SFN 17257 (F-14) (Rev. 08-2015)

Name of patient: _____

NOTICE

NOTICE IS GIVEN that on the date listed below, the undersigned voluntarily admitted self to the facility listed and **NOW** requests to be released.

Date of self-admission: _____

Facility: _____

Address of facility: _____	City: _____	State: _____	Zip Code: _____
----------------------------	-------------	--------------	-----------------

Dated this _____ day of _____ of _____ at _____ o'clock _____m.

X _____
 Patient

NOTICE

TO: Court

NOTICE IS GIVEN that the above request by the patient to be released will be postponed until judicial proceedings for involuntary treatment have been held. A petition will be filed with the court along with a report of examination if the petition is not signed by psychiatrist or physician.

Dated this _____ day of _____ of _____.

X _____
 Director, or Director's designee, or Superintendent, or Superintendent's designee,
 of the above listed present facility