FORM 7
MENTAL HEALTH ACT
[Section 25, R.S.B.C. 1996, c. 288]

APPLICATION FOR REVIEW PANEL HEARING

The information on this form is collected pursuant to section 25 of the *Mental Health Act*. It will be used to document and initiate your application for a review panel hearing. Any questions you have about this form may be addressed to the director or staff of this facility.

To the director of _____
name of designated facility

I, _____ , request a hearing by a review panel, in the case of:
first and last name of applicant (please print)

_____ , _____ .
first and last name of patient (please print) *ward / unit*

_____ _____
signature of applicant *date of signature (dd / mm / yyyy)*

_____ _____
organization (if representing an organization when making the application) *relationship to patient*

_____
address of organization