

STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF \_\_\_\_\_

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

\_\_\_\_\_  
NAME OF RESPONDENT

**ORDER FOR APPOINTMENT  
OF EXPERT EXAMINER AND  
EXAMINATION**

A petition has been filed with the Court alleging that the Respondent is  mentally ill,  chemically dependent, or  a person requiring treatment with prescribed medication. It appears to the Court that there is probable cause to believe the Respondent is a person requiring treatment.

The Respondent is ordered to appear for an examination by \_\_\_\_\_, who is a licensed  psychiatrist,  physician,  physician assistant,  psychologist trained in a clinical program,  addiction counselor,  advanced practice registered nurse.

The examination is scheduled to take place at \_\_\_\_\_  
at \_\_\_\_\_ [date and time].  
[address]

The examination must be completed on or before the date listed above unless the Court directs otherwise.

The expert examiner may consult with or request participation in the examination by a qualified mental health professional and may include with the written examination report any findings or observations by that mental health professional.

If the Respondent fails to appear for the examination, the court may issue an order to take the Respondent into custody. A relative or friend may accompany the Respondent to the examination.

The results of the examination will assist the Court in determining whether the Respondent is a person requiring treatment.

The cost of the court-ordered examination must be borne by the county that is the Respondent's place of residence: \_\_\_\_\_.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
District Judge/Magistrate