

# Substance Abuse Nonprofit Case File

## Client Information

Full Name

Date of Birth

Gender

Phone

Email

Address

## Referral Information

Referral Date

Referred By

## Case Details

Presenting Issues

Substances Used

Use Frequency

Duration of Use

Prior Treatment History

## Assessment / Evaluation

Risk Assessment

Goals

Barriers to Recovery

## Support & Services

Services Provided

Referrals Made

Client Progress

## Case Notes / Follow Up