O·A·R
Established 1971

BREAKING THE CYCLE OF CRIME WITH
OPPORTUNITIES, ALTERNATIVES, AND RESOURCES

Anger Management Program Referral Form

7-Week Program

Client Information							
Last Name:		First Name:		DOB:			
SSN:		Address:					
City:		State:		Zip:			
Phone:		Email:					
Case Number:		Group Language: (please check one)	English:		Spanish:		
Charge(s):							
Prior Offenses: If yes, please list below or attach records			Yes:		No:		
Referral Date:		Completion Deadline:					
Referral Source Information:							
Name:		Phone:					
Email:		Fax:					

Please note:

OAR is a certified provider of Domestic Violence Intervention Programs, and due to our certification, we CANNOT enroll domestic cases into Anger Management. They must be enrolled in DVIP per Virginia's standards. Referred Clients are to contact OAR NOVA within five days of the referral being sent to schedule their intake appointment; $50.00 of the $225.00 non-refundable fee is due at intake.