

# APPLICATION FOR WARRANT TO APPREHEND A PERSON FOR PSYCHIATRIC ASSESSMENT

Section 19(1) of The *Mental Health Services Act*, SS 1984-85-86, c M-13-1

## APPLICANT INFORMATION:

(Name, Address, Phone)

*Bring your government issued ID with you when you go to the courthouse  
as it is required by the Court to confirm your identity.*

## SUBJECT OF APPLICATION:

(Name, Address, Phone)

I, \_\_\_\_\_ make this application pursuant to section 19 of *The Mental Health Services Act* (the "Act") to a judge of the Provincial Court of Saskatchewan for a warrant to apprehend (first and last name of person about whom application is made) and cause them to be taken to a place where they may be examined by a physician to determine if they should be involuntarily detained at a mental health centre under section 24 of the Act.

I have reasonable grounds to believe that the above-named person:

- (a) refuses to submit to a medical examination.

☐ yes ☐ no

Date of refusal: \_\_\_\_\_

Explain: \_\_\_\_\_

- (b) is suffering from a mental disorder as a result of which they are in need of treatment or care and supervision that can be provided only in a mental health centre;

☐ yes ☐ no

Explain: \_\_\_\_\_

- (c) as a result of the mental disorder, is unable to fully understand and to make an informed decision regarding his or her need for treatment or care and supervision;

☐ yes ☐ no

Explain: \_\_\_\_\_

- (d) as a result of the mental disorder, is likely to cause harm to themselves or others or to suffer substantial mental or physical deterioration if they are not detained in a mental health centre.

☐ yes ☐ no

Explain: \_\_\_\_\_

Applicant's relationship to the person who is the subject of this application, and how long the applicant has known this person:

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Length of time (months/years)

Date: \_\_\_\_\_ at \_\_\_\_\_, Saskatchewan

Date (dd / mm / yyyy)

Location

*It is an offence to provide false information to obtain a warrant under The Mental Health Services Act.  
The information in your application, including your identity and your testimony,  
may be provided to the subject of the warrant.*

Questions you might consider when providing details in your application:

- (a) Is the person refusing to see a doctor? Do you know this from a conversation with this person, or did someone else have the conversation with the person? What was the person's response?*
- (b) What specifically is going on with this person right now that makes you think that they have a mental disorder that needs treatment? Does this person have a mental health diagnosis from a doctor and, if so, do you know what it is? Are they currently under a psychiatrist's care? If so, when did they last see their psychiatrist? Have they ever been hospitalized for their mental health? Have they been prescribed medication for their mental health? If so, are they taking that medication? Have there been any previous applications for mental health warrants? If so, when and what was the outcome of the application?*
- (c) What have you observed or heard that makes you think the person isn't understanding why others are concerned about them and their need for medical assistance?*
- (d) What have you observed or heard that makes you believe the person might cause harm to themselves or others? What have you observed or heard that makes you believe the person is likely to suffer substantial mental or physical deterioration without treatment? Have you noticed any significant deterioration in how the person is eating, sleeping or in their personal hygiene?*