



Recovery Support Services (RSS) Referral Form
Lakeview Health Services
609 West Washington St., Geneva, NY 14456
Phone: (315) 789-0550 Fax: (315) 789-0555

*RSS referrals must be completed to the best of your knowledge to be accepted by the Program Manager. Referrals can be dropped off, mailed, or faxed to the CSS Office (listed above).

Date: _____

Client Name: _____

DOB: _____

SS#: _____

Address: _____

Phone: _____ Email: _____

Insurance Information, if available: _____

Referral Source Name: _____

Contact Information: _____

Reason for Referral:

Services Requested:

- Recovery Group One-on-One Meetings with Peer Specialist

Please list any safety concerns:

