	FOR THE STATE OF ALASKA
In the Matter of the Hospitalization of:)))
Respondent.)
Date of Birth:) Case No
	NOTICE OF RIGHT TO AN ATTORNEY
Notice to Respondent: The administrator of a public treatment facility <i>Commitment,</i> and you will be held in custody fo	approved an <i>Application for 48-Hour Emergency</i> r a period of 48 hours.
The Application for 48-Hour Emergency Committee and alleges that you are an intoxicated person was alleged.	
threatened, attempted to inflict, or inflict to inflict physical harm on another; and/	cted physical harm on another, or you are likely or
is incapacitated by alcohol or drugs.	
You have the right to an attorney to represe attorney, you have the right to a court-appointe	ent you in this case. If you cannot afford and attorney at public expense.
	oly for a court order to hold you for five days. If I for up to five days, you will be given a copy of
Certificate of Service: I certify that on (date) at (time) Application for 48-Hour Emergency Commitmen respondent's guardian other:), I gave a copy of this <i>Notice</i> , the of, and <i>Certificate of Need</i> to respondent
Date	Signature
	Type or Print Name and Title