

**Rule 12.36 Forms for involuntary hospitalization of mentally ill persons.**

**Rule 12.36 — Form 1. Application Alleging Serious Mental Impairment Pursuant to Iowa Code Section 229.6.**

IN THE IOWA DISTRICT COURT IN AND FOR \_\_\_\_\_ COUNTY, IOWA

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_

IN THE MATTER OF:

\_\_\_\_\_,  
ALLEGED TO BE SERIOUSLY  
MENTALLY IMPAIRED,

Respondent.

No. \_\_\_\_\_

**APPLICATION ALLEGING SERIOUS  
MENTAL IMPAIRMENT PURSUANT TO  
IOWA CODE SECTION 229.6**

I \_\_\_\_\_, of \_\_\_\_\_ (address), allege Respondent is suffering from serious mental impairment. In support thereof I state as follows:

Based on the above facts, I believe Respondent is a danger to himself or herself or others or may be causing serious emotional injury to persons who are unable to remove themselves from Respondent's presence.

Do you request the respondent be taken into immediate custody? Yes \_\_\_\_\_ No \_\_\_\_\_

Attached hereto is a written statement of a licensed physician in support of this application.

Attached hereto is an affidavit corroborating these allegations.

(Strike the one not applicable.)

\_\_\_\_\_  
Applicant

State of Iowa }  
\_\_\_\_\_ County } ss

I, the undersigned, do solemnly swear or affirm that the matters alleged in the above application, to which my name is affixed, are true as stated, as I verily believe.

\_\_\_\_\_  
Applicant

Subscribed and sworn to (or affirmed) before the undersigned this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the State of Iowa