



Dena Murphy
Director

GATEKEEPER REFERRAL

Dear Parent,

This letter is to refer you to participate in a substance abuse assessment with Gateway Services/Gatekeeper at one of the following locations:

- 1) Juvenile Court: 2100 College Ave, Bakersfield, CA inside the Juvenile Justice Center (behind the Public Health Department). Assessments are conducted on a first come, first serve basis, from 8:00 am to 4:00 pm, Monday through Friday.
- 2) Kern County Department of Human Services: 100 E. California Ave. inside the Dept. of Human Services OC Sills Lobby, Window R8 in the Resource Center in Section D (located at the west end of the lobby). Assessments are conducted on a first come, first serve basis, from 8:00 a.m. to 11:30 a.m. and 1:00 p.m. to 4:00 p.m. Monday through Friday.

Please provide this letter to the Gateway team so they may provide me with verification of your visit and/or treatment plan. After the assessment, and if you qualify for services, the Gatekeeper will refer you to the appropriate substance abuse treatment location.

Thank you,

Social Service Worker Name: _____

Telephone Number: _____

Caseload Number: _____

Tel 661.631.6000 Fax 661.631.6631 TTY 800.735.2929
100 E. California Avenue P.O. Box 511 Bakersfield, CA 93302 www.KCDHS.org

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