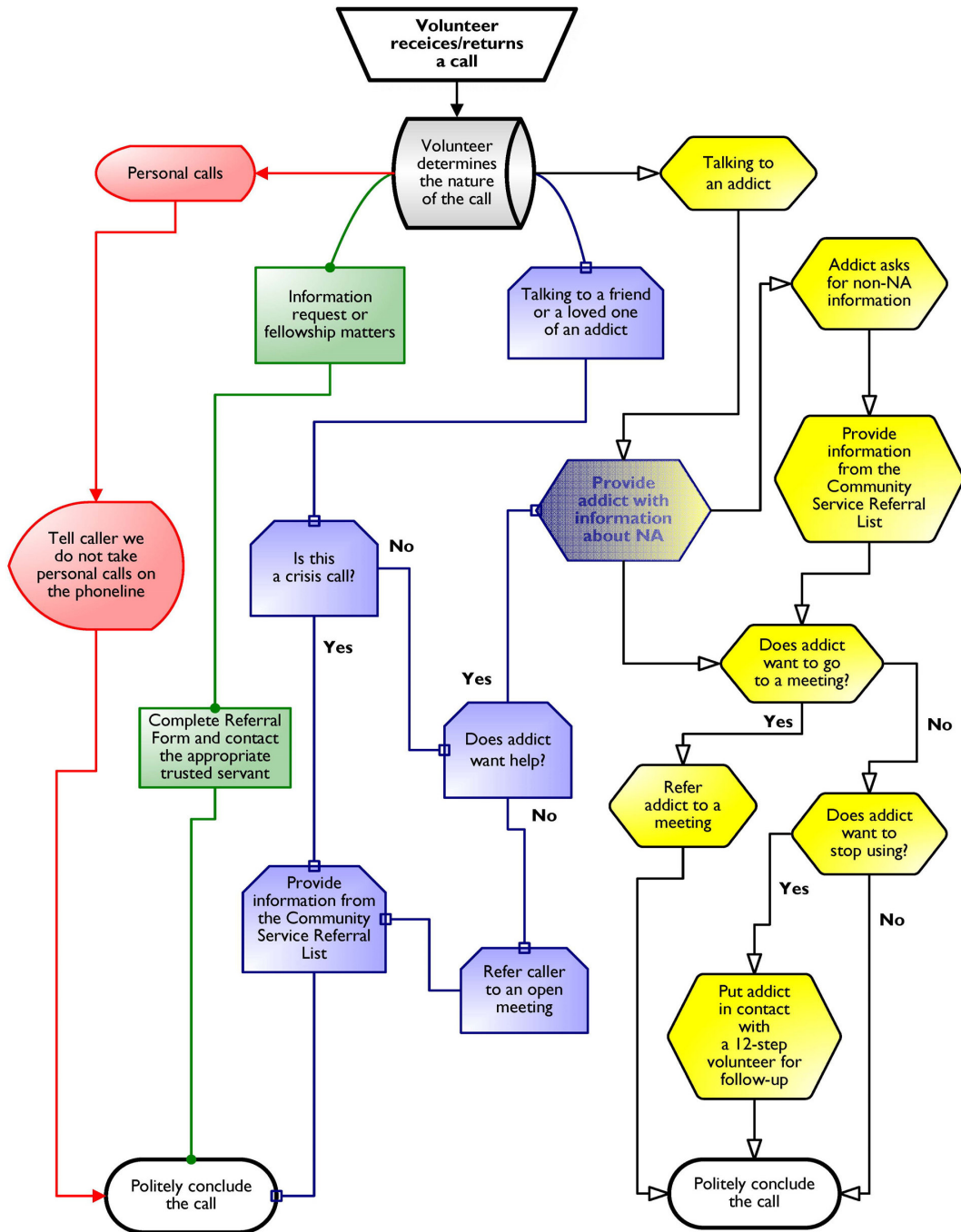


Hotline Handbook

Phoneline Flowchart



REFERRAL FORM

For referring calls to the area or region

here are times when trusted servants within the area or at the regional service committee may be more experienced with answering certain phonline requests. This is a sample referral form for the tracking of such calls. This form will allow us to follow the referral to ensure that the request is answered and the callers' needs are met.

Today's date _____ Time of call _____

Phonline Volunteer _____

Caller's name _____

Name of agency or organization _____

Caller's telephone number _____ ext _____

Alternate telephone number _____

Time & date when caller is available to be called back _____

Caller or agency's email address _____

Reason(s) for calling

_____ Atmosphere of recovery issue _____ Leadership issue

_____ Predator issue _____ Public image issue

_____ Request from media _____ Problem with meeting at facility

_____ Request for NA literature _____ Request for NA presentation

_____ Twelfth-Step call request _____ Request for meeting directories

_____ Request for meeting at facility _____ Request for activities schedule

_____ Request for NA booth

_____ Other (describe in detail): _____

Referred request to: Area Region

Committee member's name and position: _____

Notes: _____
