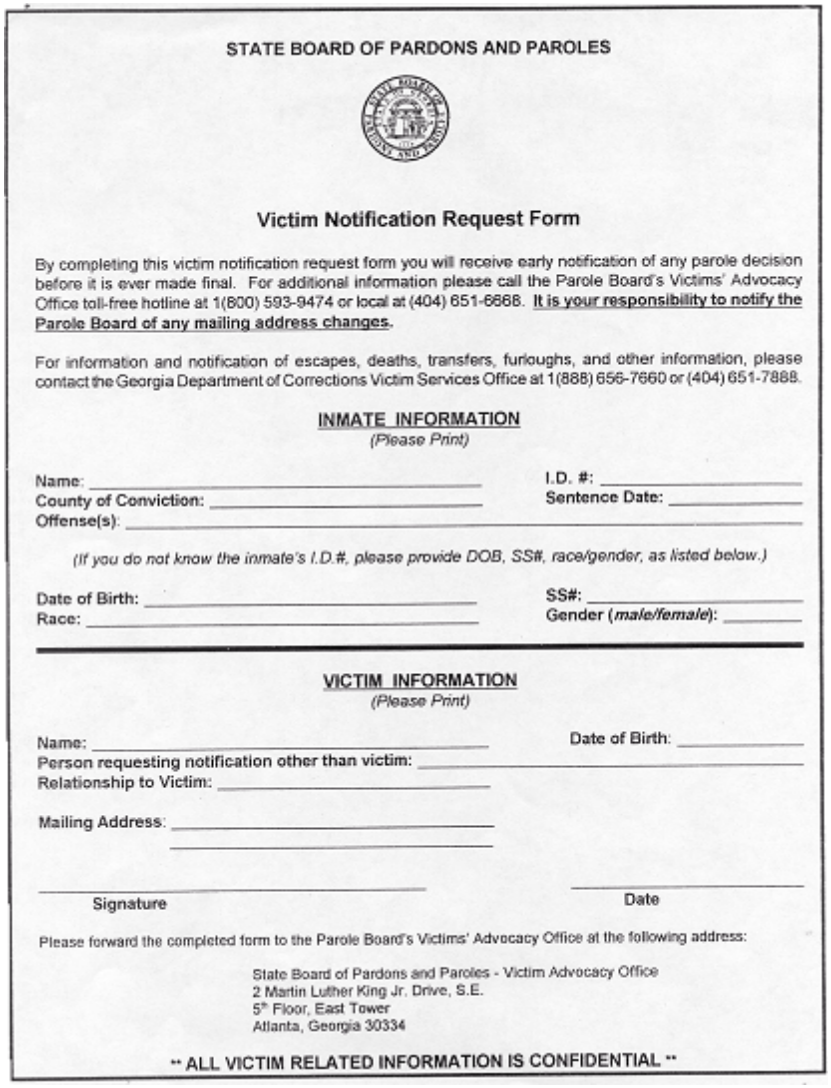
Appendix A
Notification Request Forms
Board of Pardons and Paroles and Department of Corrections



STATE BOARD OF PARDONS AND PAROLES

Victim Notification Request Form

By completing this victim notification request form you will receive early notification of any parole decision before it is ever made final. For additional information please call the Parole Board's Victims' Advocacy Office toll-free hotline at 1(800) 593-9474 or local at (404) 651-6668. **It is your responsibility to notify the Parole Board of any mailing address changes.**

For information and notification of escapes, deaths, transfers, furloughs, and other information, please contact the Georgia Department of Corrections Victim Services Office at 1(888) 656-7660 or (404) 651-7888.

INMATE INFORMATION
(Please Print)

Name: _____ I.D. #: _____
County of Conviction: _____ Sentence Date: _____
Offense(s): _____

(If you do not know the inmate's I.D.#, please provide DOB, SS#, race/gender, as listed below.)

Date of Birth: _____ SS#: _____
Race: _____ Gender (*male/female*): _____

VICTIM INFORMATION
(Please Print)

Name: _____ Date of Birth: _____
Person requesting notification other than victim: _____
Relationship to Victim: _____

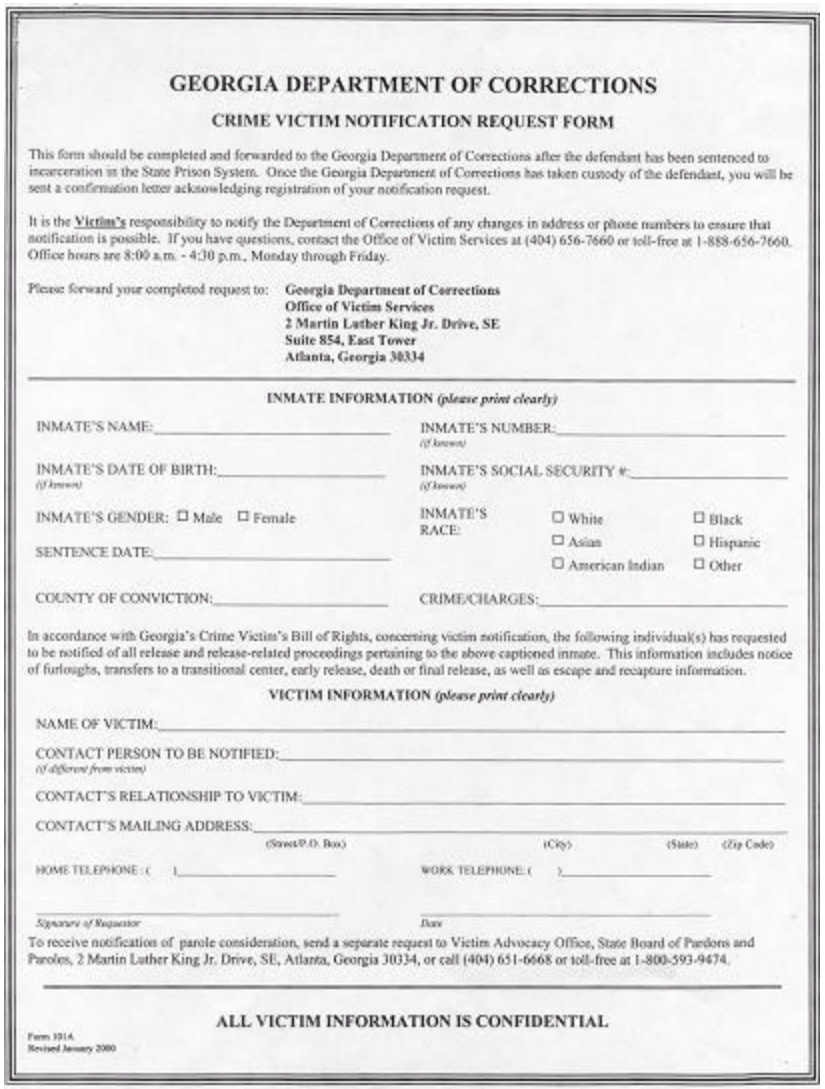
Mailing Address: _____
_____

_____ _____
Signature Date

Please forward the completed form to the Parole Board's Victims' Advocacy Office at the following address:

State Board of Pardons and Paroles - Victim Advocacy Office
2 Martin Luther King Jr. Drive, S.E.
5th Floor, East Tower
Atlanta, Georgia 30334

** ALL VICTIM RELATED INFORMATION IS CONFIDENTIAL **



GEORGIA DEPARTMENT OF CORRECTIONS

CRIME VICTIM NOTIFICATION REQUEST FORM

This form should be completed and forwarded to the Georgia Department of Corrections after the defendant has been sentenced to incarceration in the State Prison System. Once the Georgia Department of Corrections has taken custody of the defendant, you will be sent a confirmation letter acknowledging registration of your notification request.

It is the **Victim's** responsibility to notify the Department of Corrections of any changes in address or phone numbers to ensure that notification is possible. If you have questions, contact the Office of Victim Services at (404) 656-7660 or toll-free at 1-888-656-7660. Office hours are 8:00 a.m. - 4:30 p.m., Monday through Friday.

Please forward your completed request to: **Georgia Department of Corrections**
Office of Victim Services
2 Martin Luther King Jr. Drive, SE
Suite 854, East Tower
Atlanta, Georgia 30334

INMATE INFORMATION ***(please print clearly)***

INMATE'S NAME: _____ INMATE'S NUMBER: _____ *(if known)*

INMATE'S DATE OF BIRTH: _____ *(if known)* INMATE'S SOCIAL SECURITY #: _____ *(if known)*

INMATE'S GENDER: ☐ Male ☐ Female INMATE'S RACE: ☐ White ☐ Black ☐ Asian ☐ Hispanic ☐ American Indian ☐ Other

SENTENCE DATE: _____

COUNTY OF CONVICTION: _____ CRIME/CHARGES: _____

In accordance with Georgia's Crime Victim's Bill of Rights, concerning victim notification, the following individual(s) has requested to be notified of all release and release-related proceedings pertaining to the above captioned inmate. This information includes notice of furloughs, transfers to a transitional center, early release, death or final release, as well as escape and recapture information.

VICTIM INFORMATION ***(please print clearly)***

NAME OF VICTIM: _____

CONTACT PERSON TO BE NOTIFIED: _____ *(if different from victim)*

CONTACT'S RELATIONSHIP TO VICTIM: _____

CONTACT'S MAILING ADDRESS: _____
(Street/P.O. Box) (City) (State) (Zip Code)

HOME TELEPHONE: ( ) _____ WORK TELEPHONE: ( ) _____

_____ _____
Signature of Requestor *Date*

To receive notification of parole consideration, send a separate request to Victim Advocacy Office, State Board of Pardons and Paroles, 2 Martin Luther King Jr. Drive, SE, Atlanta, Georgia 30334, or call (404) 651-6668 or toll-free at 1-800-593-9474.

ALL VICTIM INFORMATION IS CONFIDENTIAL

Form 1014.
Revised January 2000

Appendix B
Additional Federal Grants Supporting Victim Assistance Programs

Grant Title	Recipient Agency	Grant Focus	Current Award Amount	Grant Period	Grant Source
VAWA Rural Domestic Violence Child Victimization Grant	CJCC	Abused Women & Children in Rural Georgia	$750,000	November 1, 1998-September 30, 2003	US DOJ
Byrne Formula Grant Program	CJCC	Violent crime, drug control, and improvements in the criminal justice system	$281,250[1]	October 1, 2001 - September 30, 2004	US DOJ
Family Violence Prevention and Services Act	DHR	Family violence shelters	$2,186,574	October 1, 2000 - September 30, 2002	HHS
National Child Abuse and Neglect Grant	DFACS	Investigation and prosecution of child abuse cases	$490,124	October 1, 2001-September 30, 2003	HHS
Preventive Health and Health Services Block Grant	DHR	Victims of sexual assault	$200,470	October 1, 2001 - September 30, 2003	CDC

[1] Amount used in Georgia for Victim Assistance; total grant is $13.25 million

HHS= Health and Human Services US DOJ= United States Department of Justice CDC= Centers for Disease Control

Source: Interviews with grant recipients and *National Directory of Victim Assistance Funding Opportunities* published by U.S. DOJ