

VICTIMS OF CRIME ACT FUNDING

VOCA FUNDING APPLICATION

First & Last Name (of person completing this form):
Name of student, if different from above:
Student's Date of Birth:/ Current Age: Gender:
Street Address:
City: State: Zip Code:
Cell Phone: ()Alt. Phone: ()
Email Address:
Best way to contact you (circle one): cell phone alt. phone email
I have experienced the following crime(s) (circle all that apply):
domestic violence sexual assault attempted homicide DWI/DUI
child abuse human trafficking other (please list):
Answer the following questions with detail. Take as much space as you need.
1. How did you hear about Resolve?
2. Why do you want to take a Resolve course? (include any information you might feel is important su as life situation, current dangers/fears or referred by therapist or victim advocate, etc.?)
3. What aspects of Resolve programs specifically interest you, based on what you have heard or read the website? What do you think you/your child will gain from the course?



4. What are you applying for? Course name (i.e. Women's Basics) Course month & year (i.e. July 2014)
5. Are you willing to write a testimonial about your experience in the course to share with potential funders and donors when we ask them for donations to our scholarship fund?
6. Are you willing to take a follow-up survey 3 months post-class? (This will help renew VOCA funding for Resolve.)
7. Any additional information you wish to provide:

After completing this application, send it to Resolve:

Email: marie@resolvenm.org **Mail:** Resolve, PO Box 8350, Santa Fe, NM 87504

FAX: (505) 992-8853

Upon submission of the application you are verifying that the information you have given on this application is complete and true. Allow 1-3 weeks for Resolve to review your application. The information you provide in this application is kept anonymous.