**Community Veteran Justice Project Initial In-take form revised 1.29.21**

Please answer the following to provide basic information related to your needs.

Name

Phone Number

Email Address

Today's Date

Emergency contacts: Name: Phone:

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip code of current address Are you homeless or at risk of homelessness?

Gender: Race: Date of birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last 4 of social security\_\_\_\_\_\_\_\_\_\_

Legal Service/Resources/ Needs (select all that apply)

Open Criminal Case/warrant Expungement/tickets Discharge Upgrade VA Benefits Pensions Divorce/Child Custody/Support Immigration/Citizenship Housing Eviction Other

Please Briefly Describe Your Current Needs/Situation:

Are you interested in receiving any other services? Select all that apply:

Education Housing Employment Other

Please email the completed form to 'office.cvjp@gmail.com'. If your needs include an open criminal case please proceed by completing the Release of Information and Statutes Intake Form found at [www.cvjp.org](http://www.cvjp.org/) under 'Next Steps'. You will be contacted by trained CVJP staff with in one week of our receipt of this form for follow-up. For more information please see [WWW.CVJP.ORG](http://WWW.CVJP.ORG)