

Case #: \_\_\_\_\_



## **Harlem Justice Corps Application**

For help completing this application or for program information, please contact us at (646) 593-8520 or by email at **HJC@courtinnovation.org**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt #: \_\_\_\_\_

City, State & Zipcode: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Emergency Family Contact: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

What was your last grade completed? \_\_\_\_\_

Please select one of the following:

On Parole \_\_\_\_\_ On Probation \_\_\_\_\_ Released from jail/prison in NY in the last year \_\_\_\_\_

Enrolled in an ATI \_\_\_\_\_ Referred by a specialized court \_\_\_\_\_

Name of Parole or Probation Officer: \_\_\_\_\_ Phone: \_\_\_\_\_

How did you hear about the Harlem Justice Corps?

- a) Information/Help Session
- b) Probation
- c) Parole
- d) Other: \_\_\_\_\_

Name of person who referred you: \_\_\_\_\_ Phone number/Email: \_\_\_\_\_