



Victim Notification Program Enrollment Application Form

Under C.R.S. 24-4.1-101 et seq., the Victim Rights Act (VRA), victims of designated crimes have the right to be notified of certain changes in the status of the offender in their case such as initial DOC facility placement, transfers to other prison facilities, referrals to community corrections (half-way houses), parole application and revocation hearings, parole hearing outcomes, escapes, apprehensions, sentence discharge or death.

If you are the victim of the offender’s current incarceration, as outlined in the VRA, by filling out this form you will be enrolled in the Department of Corrections’ Victim Notification Program. The information you provide will be confidential.

***** You are not enrolled in the Victim Notification Program until you receive an Acknowledgement Letter. It is your responsibility to notify the Department of Corrections in the event of an address, e-mail, or telephone change. *****

Date of Enrollment Application			
Offender Name	DOC # (If known)	Date of Birth	
Approximate Sentencing Date	Sentencing County	Court Case Number	
Please list the crime(s) this offender is sentenced to DOC for			
Primary Victim:			
Your relationship to the victim (e.g., self, parent, relative or court designee – please be specific.)			
Your Name (Please print)			
Address	City	State	Zip Code
Home Telephone Number	Mobile Number	Work number	
Email Address			
Name and telephone number of person distributing this form to the victim/designee			Date

Please mail to: DOC Victim Notification Program, 1250 Academy Park Loop, Colorado Springs, CO 80910; Telephone number (719)226-4709; or, in the state of Colorado only, 1(800)886-7688; Fax number (719)226-4485
 NOTE: You may also enroll online at www.colorado.gov/pacific/cdoc/victim-services or email this enrollment application to doc_vsu@state.co.us