

# APPLICATION FOR CRIME VICTIMS REPARATIONS

## CRIME VICTIMS REPARATIONS BOARD

P.O. Box 3133 Baton Rouge, LA 70821

Office: (225) 342-1749 Nationwide Toll-Free (888) 6-VICTIM [www.lcle.la.gov/cvr](http://www.lcle.la.gov/cvr)

**THIS BOX IS TO BE COMPLETED BY THE SHERIFF'S CLAIM INVESTIGATOR**

Date Application Received:

CVR #:

In order for your application to be processed, you must complete all information on this application. ***PLEASE PRINT!*** You have one year from the date of the crime to file this application. If you are filing later than one year, you must attach a letter of explanation. Please remember, the Crime Victims Reparations Board is **NOT** responsible for your bills.

You do not need an attorney to complete this form. **If you need assistance, contact the Sheriff's claim investigator** or Crime Victims Reparations office at the above-listed telephone numbers. If you choose to hire an attorney to assist you, those fees CANNOT be repaid to you by this program.

When completed, return this application to the Sheriff's office in the parish where the crime occurred. You will be notified by mail when your application reaches the Louisiana Crime Victims Reparations Board office.

VICTIM INFORMATION		Primary	Secondary
Name		Social Security #	
Address		City	
State	Zip Code	Date of Birth	
Home Phone	Work Phone	Cell Phone	
Is victim deceased?	Yes No	Does victim have children/other dependents?	Yes No
Did the victim miss work as a result of crime related injuries?	Yes No		

**Answering questions about the victim's race/ethnic background is voluntary. It will remain confidential.**

SEX MALE FEMALE	AGE of VICTIM When Crime Occurred	ETHNIC BACKGROUND: Black American Indian Asian White Hispanic Alaskan Native	Did VICTIM have a disability BEFORE the date of the crime? Yes No

**CLAIMANT INFORMATION** (Complete only if you are responsible for some/all expenses)

**LIST ONLY ONE CLAIMANT PER APPLICATION!**

Name	Social Security #
Address	City
State	Zip Code
Home Phone	Relationship to Victim:
Work Phone	Cell Phone

You were referred to this program by:  
Agency, or Company Name; Friend, Relative, Media, Other

