# **COVA Emergency Assistance Application**

**Office:** (303) 861-1160 **Fax:** (303) 861-1265



# Application must be filled out completely for COVA to process the request.

Application Date:	Referring Ag	gency:					
City Where Crime Occurred:	Co	unty:	Judicial District:				
Type of Referring Agency:							
Advocate Name:							
Agency Phone:	Agency Fax:						
Victim's Name:							
Victim advocate must verify							
·	Date of Birth:						
Perpetrator's Name:		Date of Bit	uı				
Date of Most Recent Incident	:	Amount Requesting:					
<b>Type of Assistance:</b>							
Childcare	Utilities Assistance (start-up & bills) Moving Expenses						
Emergency Shelter	Rental Assistance Bus Tickets/Transportation						
Hygiene & Basic Necessities	Short-term Nursing Home	Shelter Other:					
Is applicant on any type of go	vernment assistance? (Sect	tion 8, Assisted Living, TRUA,	etc.)YesNo				
If yes, documentation must be	e attached.						
<b>Primary Victimization: (Sel</b>	ect Only One)	Secondary Victimization	(s): (Select All)				
Adult Physical Assault	Human Trafficking: Labor	Adult Physical Assault	Human Trafficking: Labor				
Adult Sexual Assault	Human Trafficking: Sex	Adult Sexual Assault	Human Trafficking: Sex				
Adults Sexually Abused/Assaulted as Children	Identity Theft/Fraud/Financial Crime	Adults Sexually Abused/Assaulted as Children	Identity Theft/Fraud/Financial Crime				
Arson	Kidnapping (custodial)	Arson	Kidnapping (custodial)				
Bullying (Verbal, Cyber, Physical)	Kidnapping (noncustodial)	Bullying (Verbal, Cyber, Physical)	Kidnapping (noncustodial)				
Burglary	Mass Violence (Domestic/International)	Burglary	Mass Violence (Domestic/International)				
Child Physical Abuse or Neglect	Other Vehicular Victimization (Hit & Run)	Child Physical Abuse or Neglect	Other Vehicular Victimization (Hit & Run)				
Child Pornography	Robbery	Child Pornography	Robbery				
Child Sexual Abuse/Assault	Stalking/Harassment	Child Sexual Abuse/Assault	Stalking/Harassment				
Domestic and/or Family Violence	Survivors of Homicide Victims	Domestic and/or Family Violence	Survivors of Homicide Victims				
DUI/DWI Incidents	Teen Dating Victimization	DUI/DWI Incidents	Teen Dating Victimization				
Elder Abuse or Neglect	Terrorism (Domestic/International)	Elder Abuse or Neglect	Terrorism (Domestic/International)				
Hate Crime: Racial/Religious/Gender/Explanation Required):		Hate Crime: Racial/Religious/Genc (Explanation Required):					
Other:		Other:					

Race/Ethnicity	<b>Gender Identity</b>	<b>Special Classifications of</b>	
American Indian or Alaska Native	Male	Individuals (self-reported):  Deaf/Hard of Hearing  Disabilities: Cognitive/Physical	
Asian	Female		
Black or African American	Other	Homeless	
Hispanic or Latino	Transgender/Female		
Native Hawaiian or Pacific Islander	Transgender/Male	Limited English Proficiency Immigrants  Performed Academy Scoker	
White Non-Latino or Caucasian			
Multiple Races	Age	Refugees/Asylum Seeker	
Not Listed Above:	0-12	LGBTQ	
(If not listed above, please list)	13-17	Veterans	
	18-24	Not Listed Above:(If not listed above, please list)	
	25-59	NA	
	60 and Older	NA	
Has Victim reported to Law Enforceme	ent? Yes No		
Has Victim received attached Victim R	ight's Act Document? Yes	No	
Has Victim applied for Victim's Compe	ensation? Yes No		
If yes, what was requested?			
Do you have any questions if this reque	est is Victims Compensation elig	ible?YesNo	
Is this request different from the Victim	as Compensation request? Y	es No NA	
Status of Victims Compensation Applic	cation:		
Types of Service(s) Provided by Refe	rring Advocate:		
Info. re: victim rights, obtain not	ification, etc.		
Emergency financial assistance	,		
•	services, legal, medical, faith-base	ed, address confidentiality, etc.)	
Is this Emergency Assistance for rent of	r reoccurring payments/bills	_ Yes No	
If yes, necessary documentation must be	e included with the application	(lease for rent, bill for utilities, etc.)	
If yes, can client make future payments w	vithout assistance?Yes	No	
How will the victim be able to make fur	ture payments without future ass	sistance?	
Describe specifically what these funds assistance at this time:			
Has victim ever received, or applied forYes No What agency(s)?	c, assistance from any agency, in	cluding COVA or the referring agency?	
If yes, what did that agency help the vice	etim with?		

Check payable to:				
Mailing Address:				
Phone/Fax:			Yes No	
Amount Owed?Acct. /Unit/Apt. # (if applicable):				
<b>T</b>				
If applying for bus, air, o people traveling. All ticket			•	
First/Last Name & MI	Date of Birth	Leaving From	Destination	Valid ID - TSA
				THIN ID
Notes:				
I certify that the informa	tion provided on	this application is	correct and the follo	wing has been verified:
		_	a picture ID? Yo	
<ul> <li>Has Victim Advoca</li> <li>Assistance? Y</li> </ul>		landlord/agent that	the Client is not on S	ection 8 or Housing
		bal authorization from	n the Client stating tl	hat COVA has permission
to call the landlord/	agent with any qu	uestions regarding th	e lease? Yes	No
Signature of Advocate/Ca	ase Manager		Date_	
This application must be	filled out comple	etely in order to be	processed. Incomple	ete applications will be
automatically voided.				

Please email the completed application and accompanying documents to:  $\underline{\text{mandee@coloradocrimevictims.org}} \ \ \mathbf{OR} \ \underline{\text{karla@coloradocrimevictims.org}}$ 

Type of Emergency Assistance	VOCA Eligible	COVA Eligible	Documentation Needed	Notes
Hygiene and Basic Needs (Food, Clothing, Soap/Detergent, Shampoo, Toothbrush/Paste, Feminine Products, Diapers/Wipes	Y	Y	Itemized store receipt.	Can only reimburse agency (with proof of payment).
Rental Assistance (No Deposits)	Y	N	Current full signed lease.  (Advocate must verify with leasing agent/landlord that all information on lease is accurate). Victim advocate must get authorization from client that COVA can call landlord, if needed.	Applicant must be on lease. No past due before date of crime. No mortgage.
<b>Utilities</b> (Start up or current bill)	Y	Y	Current bill. Applicant must be on bill.	No past due before date of crime.
Moving Expenses (Truck Rentals, Moving Help and Storage)	Y	N	Invoice, bill, quote from moving company.	Can only reimburse agency (with proof of payment).
Relocation (bus, airline, Amtrak) and Other transportation	Y	N	Preferred method of transportation. Date and time of departure.	Agency must confirm beforehand that applicant will be received (by shelter, family, etc.).
Childcare	Y	N	Bill from licensed childcare provider.	Needs to be directly related to the crime. One month only.
Emergency Shelter/ Hotel Stay	Y	N	Room and Tax only.	When no other safe, short- term residence is available.

<sup>\*</sup>VOCA cannot directly reimburse victims, or a victim's family or friends. Only agencies can be reimbursed.

Learn more about COVA's Emergency Fund via this online webinar: <a href="https://www.youtube.com/watch?v=7Kd-mYSTB2w&feature=youtu.be">https://www.youtube.com/watch?v=7Kd-mYSTB2w&feature=youtu.be</a>

<sup>\*</sup>COVA can cover most expenses but typically has a cap of up to \$150 and is one-time only assistance.

# THE RIGHTS OF CRIME VICTIMS IN COLORADO

As a crime victim, you may have experienced injury, loss, confusion, and a disruption of your life. Having information and an understanding about the criminal justice system may be helpful to you at this time.

Once a crime is reported to a law enforcement agency, the criminal justice system process begins. It can be a confusing and frustrating experience. There are victim/witness advocates throughout Colorado to provide support and assistance to victims of crime during this process.

In 1992, Colorado voters amended the state Constitution to include Victim Rights. The Victim Rights Amendment states:

Any person who is a victim of a criminal act or such person's designee, legal guardian, or surviving immediate family members if such person is deceased, shall have the right to be heard when relevant, informed and present at all critical stages of the criminal justice process. All terminology, including the term "critical stages" shall be defined by the general assembly (Article II, Section 16A Colorado State Constitution).

## **Victim Rights Act**

The enabling legislation known as the Victim Rights Act (VRA) provides victims of crime an active role in the criminal justice process. The following is a **summary** of the rights guaranteed by the VRA (*for the full VRA refer to Colorado Revised Statues 24-4.1-301, through 24-4.1-304 at https://www.colorado.gov/pacific/dcj/victim-rights*):

- To be treated with fairness, respect and dignity, and to be free from intimidation, harassment, or abuse;
- To be informed of the availability of financial assistance, community resources, and the possibility of restorative justice practices;
- To be **present and heard** regarding bond reduction or modification, modification to a criminal protection order, a subpoena for the victim's records, motions for sequestration of the victim from a critical stage, or the acceptance of a plea agreement;
- To be heard by phone or similar technology when a victim cannot appear in court (at the court's discretion);
- To be informed of the status of the case, scheduling changes or cancellations, and of the final case disposition;
- To consult with the district attorney prior to any disposition of the case and/or before the case goes to trial;
- To have the court prevent any party at any court proceeding from compelling testimony regarding a victim's address, telephone number, place of employment of other locating information;
- To receive and prepare a victim impact statement and to be present and/or heard at the sentencing hearing;
- To have the court determine the amount of restitution, if ordered, and to be informed of the right to pursue a civil judgement against the person accused of the crime.

#### After sentencing, victims have the right, upon written request:

- To be informed when a person convicted of a crime against the victim is transferred to a less secure correctional facility, placed on non-residential status, is permanently or conditionally transferred from any state hospital, or is released, discharged, or permanently transferred from the custody of county jail or department of corrections;
- To be informed of and/or heard at any proceeding at which post-conviction release from confinement in a secure state correctional facility, or the sealing/expungement of records is being considered;
- To have the victim's social security number redacted or excluded from criminal justice documents when records are released to someone other than the victim, a criminal justice agency, or the defendant's attorney of record;
- To be informed of the process for enforcing compliance with the Victim Rights Act;

#### **Agency Responsibilities**

- Agencies with Automatic Responsibilities to Provide Notification: Law Enforcement, District Attorney, Division of Youth Corrections, Judges/Courts
- Agencies that Require Victims to Request Notification: Probation, Community Corrections, Department of Corrections/Parole, State Hospital

### **Victim Responsibilities**

- Keep appropriate criminal justice authorities informed of personal contact information, and request that such information be kept confidential.
- Provide written requests to the appropriate agencies for post-sentencing notification. Information on requesting notification from such agencies can be found at <a href="https://www.colorado.gov/pacific/dcj/victim-rights">https://www.colorado.gov/pacific/dcj/victim-rights</a>.

A victim's rights are related to certain "critical stages" in the criminal justice process. For a list of these stages and of the crimes covered by the victim rights act, or for more information about the rights of crime victims in Colorado, visit the Department of Criminal Justice, Office for Victims Program website at https://www.colorado.gov/pacific/dcj/victim-rights or call 303-239-5719 or toll free at 1-888-282-1080.