

STATE OF TENNESSEE BOARD OF PAROLE

Victim Services 500 James Robertson Parkway Davy Crockett Tower, 4th Floor Nashville, TN 37243-0850



CONFIDENTIAL Victim/Member of the Public Request for Notification

NOTE: It is the responsibility of the victim or victim's representative to provide the Board of Parole with a current mailing address, and to keep the Board informed of any changes in the mailing address. BY LAW, CONTACT INFORMATION FOR REGISTERED VICTIMS OF CRIME, FAMILY MEMBERS, AND INTERESTED MEMBERS OF THE PUBLIC WILL BE HELD CONFIDENTIAL.

Date:	-	
Offender Name:	TOMIS	#:
Race: Sex:	DOB:	Case Number:
Have you been court ordered restitution	n? (Check if yes): BOP is not r	esponsible for collecting restitution.
		s, and Parole Releases as applicable. NOTE: Failur event Victim Services from processing your request
Your Name:		
Address:		
Home Phone:		
E-mail Address:		
	es No No	
If not, please indicate your relationship	o to the victim (please select one):	
Spouse Parent Parent	Child Sibling	Grandparent Grandchild Grandchild
Step Parent Step Child	Step Sibling Hal	f Sibling Other
Victim's Name:		
Special Notes:		
MAIL TO: Tennessee Board of Parc 500 James Robertson Pk Nashville, TN 37243-08	ole, Victim Services Division wy, Davy Crockett Tower, 4 th Floor 50	
Please direct all questions to BOP: Phone: Toll Free at 866-795-746 Fax: 615-741-5337 E-mail: Victim.Witness@tn.gov	7 or locally at 615-532-8112	
FOR OFFICIAL USE ONLY Date Entered: Special Instructions:	Registration Type:	VPIN: