

IACP Leadership in Victim Services Award

Section 1: Application

Agency:			
Head of Agency Name (Chief/Sheriff/etc.)			
Head of Agency Phone:			
Head of Agency Email:			
Address:			
City:			
State/Province:		A RE	7
Postal Code:	4514		56
Country:			
Program/Project Name:	447		
Year Program	1 3/	1 2	
Established:			
Program Type (check all that apply):	□ Department-wide Program	☐ Victim Assistance/Witness Program	□ Other
Provide a bried description	n for Other:		Y Mariji
Is this program a previous Excellence in Victim Services Award winner?	□ Yes	□ No	□ Don't Know
Program Contact:			
Phone:			
Fax:			



Email:				
Agency/Program Website:				
Agency Size: (Enter number of sworn officers within your agency.)				
Do you share jurisditction with another agency?		Yes		□ No
If yes, specify which agency and	how your departm	nents work together.		
	☐ IACP Website	□ www.responstovi	ctims.org	☐ IACP Annual Conference
	□ NCVC Website	□ OVC Website		□ DOJ Website
Where did you learn about the award? (check all that apply)	□ IACP Net Website	☐ IACP Net mailing		☐ Police Chief Magazine
	□ Not Sure	☐ Other (Please Spe	cify):	
Section 2: Agency & C Briefly describe your agency				



Section 3: Program Introduction

riefly describe t	the history of the progr	ram including the leng	th of the program's e	existence. (Character li	mit: 1,000)
rovide a brief d	escription of the progra	am activities and wha	t makes the program	unique. (character lin	nit: 1,650)





Section 4: Leadership

leadership. (C	,					
scribe how vi	ictim services are	incorporated in	nto the agency a	nd any effect on	staff. (Charact	er limit: 2,200)
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scribe how v	ictim services are	incorporated in	nto the agency a	nd any effect on	staff. (Charact	er limit: 2,200)



Section 5: Partnerships

Section 5. Fartherships	
Describe the program's internal and external partners and how the partnerships developed. (Character limit: 1,6	50)
Section 6: Victim Needs	
Describe how your agency assessed the needs of victims in your community, if applicable. (Character limit: 1,100))
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Describe how the program addresses crime victims' critical needs. These might include the need for safety (protection from perpetrators and assistance in avoiding re-victimization); support (assistance to enable participation in justice system processes and repair of harm); information (concise and useful information about justice system processes and victim services); access (opportunity to participate in justice system processes and obtain information and services); continuity (consistency in approaches and methods across agencies through all states of the justice process); voice (opportunities to speak out on specific case processing issues and larger policy questions); and justice (receiving the support necessary to heal and seeing that perpetrators are held accountable for their actions). (Character limit: 3,850)

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Section 7: Training

	training, etc.). (Character limit: 1,650)	
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Section 8: Performance Mo	onitoring	
Outline the methods used to evaluate	the effectiveness of the agency's effort	ts and initiatives in addressing
victims' needs. (Character limit: 1,650)		



	nent or evaluation	results that d	emonstrate the	program's succes	ss. (Character limit	: 1,650)
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Section 9: Attachments

Required Cover Letter

A cover letter, signed by the agency executive is required. Please send the letter as an attachment.

Optional: Supporting Documents

Attachments and supporting documents are not required to apply for the award, nor are they used in the judging process. Supporting files may be used in the award ceremony or in support of your program if shared with other law enforcement agencies or something like this. You may provide up to five attachments: PDF, Excel, Powerpoint, Word, jpg or other pictures.

Section 10: Submit

Please email your application and supporting documentation to awards@theiacp.org.