

AGENCY UPDATE / ADDITION FORM

cominghomedirectory@cjinstitute.org • www.cominghomedirectory.org

Please complete this form, indicating if information about your agency has changed. Once complete, please email, mail, or fax to the Crime and Justice Institute at Community Resources for Justice (contact information at end of document).

Date: _____

Revised/Updated Information (if applicable):	
Agency Name: Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Agency Type: Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	Please check all that apply: <input type="checkbox"/> Administrative Issues <input type="checkbox"/> Clothing <input type="checkbox"/> CORI <input type="checkbox"/> Disability <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Education <input type="checkbox"/> Emergency Assistance <input type="checkbox"/> Employment <input type="checkbox"/> Faith-Based Organizations <input type="checkbox"/> Families <input type="checkbox"/> Food <input type="checkbox"/> Fuel Assistance <input type="checkbox"/> Hotline <input type="checkbox"/> Housing <input type="checkbox"/> Legal <input type="checkbox"/> LGBTQ+ <input type="checkbox"/> Other Groups: _____ <input type="checkbox"/> Older Adults <input type="checkbox"/> Physical and Mental Health <input type="checkbox"/> Sex Offenders <input type="checkbox"/> Shelters <input type="checkbox"/> Substance Abuse <input type="checkbox"/> Support Groups <input type="checkbox"/> Transportation <input type="checkbox"/> Veterans <input type="checkbox"/> Women
Public Contact Name: (provided for consumers) Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Agency Street Address, City, Zip: Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Telephone #: Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Fax #: Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Website Address: Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Public Email Address: Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of Services Provided: Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Service Hours: Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Cost/Fees: Revise? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Revised/Updated Information (if applicable):	
Restrictions/ Requirements: (i.e. residency, length of stay, verification of need, population age, etc.) <i>Revise?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Wait Time: <i>Revise?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Public Transportation: <i>Revise?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Languages: <i>Revise?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Other Locations: <i>Revise?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Private Contact Information (for internal CJI use only)	
Private Contact Name, Title:	
Private Mailing Address, City, Zip:	
Private Contact Email:	
Private Contact Phone #:	

Please email form to cominghomedirectory@cjinstitute.org

Or, mail to:

Coming Home Directory
 Crime and Justice Institute at Community Resources for Justice
 355 Boylston Street
 Boston, MA 02116
 Fax 617.262.8054



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