

Community Restorative Centre

Head Office

174 Broadway, Chippendale NSW 2008 PO Box 541, Broadway NSW 2007 Ph: 02 9288 8700 Fax: 02 9211 6518

APPLICATION FOR TRAVEL AND ACCOMMODATION ASSISTANCE

- Do you have a close family member or close kinship relative in custody in a NSW Correctional Centre?
- Do you have to travel at least 100 kms to visit them?
- Do you experience financial hardship which may restrict you from visiting your loved one?
- Perhaps your partner or child is in custody, or you have children or grandchildren who need to visit their parent?

The Community Restorative Centre (CRC) may be able to provide some assistance to you. You may be eligible for reimbursement of some of the travel and accommodation costs related to the visit.

Are You Eligible?

- You must be a member of the inmate's immediate family, support network or have a kinship relationship. This includes people who have acted as an individual's carer / legal guardian / have strong kinship e.g. foster carer, grandparent, auntie/uncle.
- You live <u>100km or more</u> from the correctional centre you wish to visit (except in special circumstances that make the journey particularly difficult. Please call CRC to discuss.)
- You are on a low income or have financial hardship.
- Your loved one is in a NSW correctional facility. (NB: Junee Correctional Centre we can't accept applications for visits to Junee as they have their own assistance scheme. Contact Junee on 02 6930 5585 or their Families Liaison Officer for further info on 02 6930 5562.)
- You haven't received travel/accommodation assistance for a visit made in the last 12 weeks.

What are you Eligible For?

Reimbursement of Costs Relating to the following:

- Train/Bus tickets at economy/concession rate within NSW.
- One night's accommodation maximum \$110/night (unless exceptional circumstances please call CRC to enquire first). NB: Food and Beverage expenses will not be reimbursed
- Assistance with fuel costs is available based on \$10 per 100km of direct travel between NSW address and correctional centre. CRC will calculate the standard kilometres in distance using mapping software. However, please submit a receipt showing that you purchased fuel within 2 days of the travel dates.
- Taxi Fares directly to and from Train/Bus station closest to Correctional Centre you are
 visiting only where public transport isn't available and there is no suitable alternative. You
 must have receipts for the taxi fare.

Application for Travel and Accommodation Assistance cont'd:

How to Apply

- Please complete the following application and return within 30 days after your visit.
- Please attach ALL original receipts to your application (to verify your travel/accommodation) and return with your application.
- PLEASE NOTE: All receipts must be **ORIGINAL**, not photocopies. Financial Reimbursement will not be paid unless forms/receipts are received within 30 days after your visit.
- Assistance can only be provided for ONE (1) visit every <u>12 weeks</u>.

How Money will be Reimbursed

- Funds will be reimbursed via electronic transfer by EFT into your nominated account. The
 account must be in the name of the claimant.
- Please check that you have clearly entered the correct account details including BSB, Account Number and Name.

PLEASE ALLOW 21 DAYS FOR PROCESSING.

Important

- Prior to travelling, you must phone the correctional centre to book and confirm your visit.

 Phone number and visit info for correctional centres can be found on the internet at: http://www.correctiveservices.justice.nsw.gov.au/prison/correctional-centres
- For more copies of this application form please contact CRC or visit our website at www.crcnsw.org.au
- You will need the inmate's MIN number to complete the application form.
- If you are unable to travel as often as you'd like or can't travel at all, it may be possible for you to have a Family Video Contact visit via a video link if available. For further information on Family Video Contacts, please contact the Family Workers at CRC on 02 9288 8700.
- NB: As a requirement of the funding and for verification and statistics purposes, some of your information on the application form is shared with Corrective Services NSW – this includes details of the claim, the date of your visit, number of visitors, cultural background and MIN number of the inmate.

Please send your completed application form and attached receipts to:

BROKERAGE Community Restorative Centre PO Box 541 Broadway NSW 2007

FOR FURTHER INFORMATION AND ENQUIRIES PHONE CRC on 02 9288 8700

Travel & Accommodation Assistance has been funded by Corrective Services NSW.



Community Restorative Centre

Head Office

174 Broadway, Chippendale NSW 2008 PO Box 541, Broadway NSW 2007 Ph: 02 9288 8700 Fax: 02 9211 6518

APPLICATION FORM FOR TRAVEL AND ACCOMMODATION ASSISTANCE

Your Details (Person Claiming Reimbursement):

| Name of Applicant : | VIN: |
|--|---------------------------------------|
| No./Street: | <u> </u> |
| Suburb: | Postcode: |
| Telephone Number: Home: | Mobile: |
| Email Address: | |
| Date of Birth: | Gender: |
| Cultural Background (Please tick): | |
| ☐ Aboriginal or Torres Strait Islander | ☐ Born Overseas, English Speaking |
| ☐Australian Born (not ATSI) | ☐ Born Overseas, Not English Speaking |
| etails of Visit: | |
| Name of Inmate Visited : | MIN: |
| Relationship / Kinship to Inmate: | <u> </u> |
| Address travelled from: | |
| Correctional Centre Visited: | |
| Date of Visit: | |
| Date/s travelled: | |

Details of additional visitors travelling with you:

Cultural Background (Please tick)

| Name | Date of Birth | Gender | Relationship / Kinship (to inmate) | VIN | Aboriginal or Torres Strait Islander | Born Overseas, English Speaking | Born Overseas, Not English Speaking | Australian Born (not ATSI) |
|------|------------------|--------|---------------------------------------|-----|--|---------------------------------------|---|-------------------------------|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Type of Assistance Applied for:

| *Please note - original formal receipts for all travel and accommodation will be required to validate your app |
|--|
|--|

| Details of Reimburs Requested: | ement | Bus Fare | Train Fare | Taxi Fare | Mileage | Accommodation |
|---|--|----------------|-----------------|---------------------|------------------|------------------|
| Tick each that apply | | | | | | |
| Amount of Fare/Acc | comm | \$ | \$ | \$ | N/A | \$ |
| Total Kms From Hor | ne to Correcti | onal Centre | (one way): | | | |
| Name of Hotel (if Ad | ccommodation | า reimbursei | ment sought) | | | |
| Account details for E | Electronic Fu | nds Transfe | er (EFT) | | | |
| Account name: | | | | Bank: | | |
| BSB: | | | Account numb | per: | | |
| * Account must be in th | ne name of the (| applicant. Che | eck ALL Account | details / numbers c | are clearly ente | red and correct. |
| Applicants Signatur | e: | | | | Date: | |
| On completion, please Brokerage Community Restorative PO Box 541 Broadway NSW 2007 APPLICATIONS WILL OF PROCESSED IF ELIGIBIL NB. Please allow appro- | ve Centre NLY BE CONSII ITY CRITERIA A | ARE MET AN | ID ORIGINAL IN | IVOICES/RECEIPTS | | |
| DFFICE USE ONLY: | | | | | | |
| Amount Approved: | FARES: \$ | ACC | OMM: \$ | MILEAGE: \$ | TO | TAL: \$ |
| Receipts Supplied: | | | | | | |
| receipts Supplied. | FARES □ | ACCO | OMM: □ | FUEL: □ | | |