



freeDimensional's Distress Services Intake Form

APPLICANT INFORMATION

Name:

Date of birth (m/d/year):

Sex:

Address:

Email Address:

Contact phone numbers (at least one):

Country(ies) of citizenship:

Current location:

Languages spoken:

CASE INFORMATION:

1. What is(are) your area(s) of work? Please describe your latest projects.

2. Are you member of any organization, academic institution or professional association? If so, please describe it's mission or main focus of work, provide address, phone number, email, and name of the person accountable.

3. Are you currently employed? If so, please provide your employer's contact information if relevant to your situation.

4. Please describe your current situation.

5. Are you facing persecution as a result of your work? (threats, attacks, harassment, arrests, socially marginalized, blacklisted, etc.) Please give specific examples, with dates if possible.

6. Please state your reason for requesting freeDimensional's assistance and give a detailed account of your needs.

7. Have you sought other sources of support? Which ones?

8. If this request is urgent, please explain why.

Please provide contact information for at least 2 sources that can verify your story.

Please return this form to: distress@freedimensional.org

PLEASE NOTE: Our staff carefully vets all cases. Due to the high volume of requests, the average response time is one week.

Last updated 11/1/09