

REQUEST FOR CONSULTATION (Corrections Facilities)

When you've completed this form, save it and e-mail it to: empty@urbanesque.com

YOUR CONTACT INFORMATION

Facility Name: _____ Type: _____
Your Name: _____ Title: _____
Mailing Address: _____
Address 2: _____
City: _____ State: _____ Zip: _____
e-mail address: _____ website: <http://> _____
Day Phone: _____ Evening Phone: _____
Are you authorized to make purchases for this organization? Y / N / Other

Privacy Policy: Any information you submit to E&M is private and confidential and will not be shared with any other organization, or be sold as part of a mailing list.

CONSULTATION REQUEST

Tell us a little bit about your facility, or the program you offer. What is the make-up of the inmate population? (Men, women, mixed, juvenile, security level) Is there a unique trait about your facility? Are you a state, federal, city or county facility? Are you in probation services, reintegration services?

Now, tell us what is drawing you to E&M's workshops.

- I like your guarantee.
- I like the idea of using art & creative activities to do the work our students need to do
- We're stuck and we're looking for ANYTHING that will unstick us.
- Someone I know participated in a workshop and it changed their lives.
I want that for our inmates, especially since you work through existing programs.
- Other

Are there particular programs you see as a match for our workshops? What outcomes would you like to see for the inmates in their programs?

Describe the general attitude of your facility. Is there a pall of lethargy? Overwhelm? Frustration? Panic? Violence? Despair?

What times are good for us to call to schedule a FREE consultation?