

CENTER FOR HUMAN RIGHTS & CONSTITUTIONAL LAW

(An IOLTA-funded statewide support center)

SUPPORT SERVICES PRIORITIES SURVEY

Program name: _____

1. Does your organization provide legal services specifically directed toward immigrants, refugees, children, or indigenous peoples?

Yes _____ No _____

If yes, what types of services to you provide?

Political asylum _____ Police abuse _____

Representation in removal hearings _____ Educational rights _____

Visa processing _____ Other _____

Public benefits _____

2. If your organization serves immigrants, refugees, children, or indigenous peoples with regards to public benefits, what kind of programs do you deal with?

3. When you require support services in serving your clients where the legal rights of immigrants are at issue, please prioritize the services most relevant to your needs (5 being most relevant, and 1 being least).

Consultation on cases/issues _____ Written resource materials _____

Co-counseling in litigation _____ Training _____

Referrals to resources _____ Other: _____

4. Support centers are expected to be leaders in their fields and to make field offices aware of new and emerging trends and issues. Which of the following would you find most useful in keeping up with the developments on immigrant and refugee rights and complex litigation?

Legislative updates _____ Publications _____

Training: _____ Conferences _____

Web site: _____ Other: _____

5. What is your preferred form of communication when using support services?

Telephone/FAX _____ E-mail _____

6. Have you ever used the support center services of the Center for Human Rights and Constitutional Law, including accessing the Center's web site, www.centerforhumanrights.org?

If so, how would you rate the service received?

Excellent _____ Good _____ Adequate _____ Poor _____

7. If you have had experience with the Center for Human Rights and Constitutional Law and would like to offer comments and/or suggestions, please do so below.

(attach separate sheet if needed)

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Your name and title: _____

Phone number: _____ Fax: _____

E-mail address: _____

Please return by mail or FAX to

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