## OFFICE OF CORRECTIONS OMBUDSPERSON

P.O Box 855 Trenton, New Jersey 08625

## REQUEST FOR ASSISTANCE FORM

The Office of the Corrections Ombudsperson (OCO) is an independent and neutral agency committed to protecting the safety, health, and well-being of individuals incarcerated in New Jersey state prisons. We address both individual and systemic issues by conducting independent observations, reviewing records, asking questions, making referrals, recommending improvements, publishing reports, and providing information. While we offer guidance on NJDOC policies and advocate for improvements, we do not have the authority to change policies, provide legal advice, or mandate specific medical treatment. We can evaluate concerns related to medical care but cannot diagnose conditions or require particular courses of treatment.

Before contacting us, please first attempt to resolve the issue through the NJDOC inquiry and grievance system. These actions become part of the Department's permanent records and may help protect your legal rights if further action is needed.

For urgent health or safety concerns, please alert NJDOC staff immediately. Phone: 555-555-5555 Office hours: (8:00am - 4:00pm)

INCARCERATED PERSON INFORMATION				
NAME			STATE#	
INSTITUTION	HOUSING	UNIT	DATE	
NATURE OF REQUEST:				
Date of Incident:	1	Place of Incident:		
JPay Inquiry / Grievance subm  Briefly and clearly describe your concerneeded:	rn. Please submit only on	o MR - 007 s		ional paper if
Describe previous attempts to resolve the is	ssue, including reference no	umbers and the name	s of staff with whom you have discu	issed the concern.