

# South Carolina Department of Probation, Parole and Pardon Services

## Service Provider Application

*Please email the completed form to Service.Providers@ppp.sc.gov.*

**Completion of this form serves as a request to be listed in the Department's Service Provider Directory.**

Service Provider Name		Contact Person and Title	
Physical Address		Phone Number	
		Fax Number	
Mailing Address (if different)		Email Address	
		Website	
Counties Served:			

Service Information (check if applicable):

- Handicap Accessible     
  Available in Spanish     
  Transportation Provided / Public Transportation Nearby

**Please complete for each program.**

Program Name:	Services are open to:
Description of Services:	<input type="checkbox"/> Victims Only <input type="checkbox"/> Veterans Only <input type="checkbox"/> Sex Offenders <input type="checkbox"/> Violent Offenders <input type="checkbox"/> Males Only <input type="checkbox"/> Females Only <input type="checkbox"/> LGBTQ+ <input type="checkbox"/> Individuals with serious mental illness
	<input type="checkbox"/> Allows medications ( <i>Housing Providers</i> ) Notes:
Duration of Program: _____	Cost of Services: \$ _____ <input type="checkbox"/> Sliding Scale <input type="checkbox"/> No Cost
Program Schedule Hours: Monday _____ Friday _____ Tuesday _____ Saturday _____ Wednesday _____ Sunday _____ Thursday _____	Per: <input type="checkbox"/> Day <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Hour <input type="checkbox"/> Session <input type="checkbox"/> One-Time  <input type="checkbox"/> Accepts Insurance <input type="checkbox"/> Accepts Medicaid  Financial Assistance/Additional Cost Notes:
Intake Process Notes:	Eligibility Notes/Restrictions:

*I understand that the above information will be used to identify the service provider's role in providing rehabilitative services for offenders under the Department's supervision. I also understand that all service fee/costs are at the offender's expense and are not the responsibility of the South Carolina Department of Probation, Parole and Pardon Services and that referrals do not constitute a contract.*

\_\_\_\_\_  
Signature of Service Provider

\_\_\_\_\_  
Date

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