



**Justice Center for the  
Protection of People  
with Special Needs**

**Request for Amendment of Report of Substantiated Finding**

**Name:** \_\_\_\_\_

**VPCR Case #:** \_\_\_\_\_

**Date of Report of Substantiated Findings Letter:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Additional contact information**

**Phone:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**State the reason for your request (attach additional sheets as necessary):**

**Any additional information you would like to submit in support of your request for an amendment may be submitted to [jc.sm.admappealsunit@justicecenter.ny.gov](mailto:jc.sm.admappealsunit@justicecenter.ny.gov). Be sure to include the VPCR Case Serial Number.**

**Dated:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Subject**