## **Permissions**

The American Prison Writing Archive (APWA)
Johns Hopkins University; 3400 N. Charles St.; Baltimore, MD 21218

These fields will not be included in the display on the publicly acc	· · · · · · · · · · · · · · · · · · ·
Name or anonymity selection is not provided in the Questionnaire Section below.	
Legal Name (please print clearly):	
Address (current and/or most reliable):	
Signature (granting permission to include your work in the American Prison Writing Archive):	
	Date Today:
APWA may share my writing on APWA promotional materials (including newsletters circulated in prisons)	
How did you hear about us?:	
All answers below are voluntary. Any information provided in this section will be publicly available in connection with your essay(s). APWA is a web (internet) based platform. Your essay(s) and any information you choose to provide will be viewable by millions across the world and easily searchable by anyone with internet access. If you do not want an answer to be shown on the internet, leave it blank.	
Pen Name:	I wish to remain anonymous
If anonymity is not selected and Pen Name is left blank, APWA will	display your Legal Name alongside your essay(s)
Year of Birth:	Race/Ethnicity check one or more:
Gender check one: Female Male Trans	African American Asian American Pacific Islander
and/or other information:	Latina/o/Hispanic Native American White
and/or other information.	and/or other information:
Sexual Orientation Bisexual Heterosexual	
check one: Homosexual Other	Religious Identification check one:
and/or other information:	Buddhist Christian Hindu
	Muslim Native Jewish
Do you have children? Yes No	None
Are you a veteran? Yes No	and/or other information:
Relationship to Prison check one:	Facility Type check one for each row:
Incarcerated Formerly incarcerated Volunteer	row 1 Federal Facility State Facility Jail Facility
Staff Teacher CO	row 2 Public Private (for-profit)
Other (please clarify)	Security Level check one:
	Minimum Medium Maximum
Work you perform inside:	Supermax Death Row
Do you have relative out a second to the control of	Full name of Facility where you reside or are employed:
Do you have relatives who are, or have been, incarcerated?	(include City and State)
Yes No	
Do you have relatives who are/have been employed in prisons?	Age at start of current conviction or prison employment
Yes No	Is this your first incarceration?