

Tamara Levy, QC Director, UBC Innocence Project

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CASE APPLICATION FORM

Instructions:

- i. Please read the enclosed document entitled, "Cases We Consider for Review ("Eligibility Guidelines")" before completing this application form.
- ii. Please respond as fully as possible to each of the following questions. Complete and accurate answers allow us to make faster and better decisions about what action the Innocence Project should take.
- iii. If you need more space to answer a question, please write on the back of the page or attach another sheet.
- iv. If a question does not apply to your case, please indicate "N/A".
- v. If you have difficulty completing the form, please request help or alternatively, contact our office at (604) 827-3616.

This application <u>does not</u> create a solicitor-client relationship. The UBC Law Innocence Project will endeavour not to use or reveal the information you provide except in certain limited circumstances, including those described in any Authorization Form(s) signed in the past.

Part 1. Brief Summary of Information:			
Full Name (including any aliases):			
Offence(s) for which you were			
convicted (and claim innocence):			
Sentence Received:			
Are you currently in prison?	□ Yes □ No		
If Yes , name of prison:			
Mailing address of prison:			
Parole Eligibility Dates:	Day Parole:		
	Full Parole:		
FPS Number:			
Name of current IPO:			
How long has this person been your			
IPO?			
If not in prison, current address:			

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Telephone:		
Email:		
Date of birth:		
Language:	English	□ Other [please state]:
Do you have any medical problems	□ Yes	🗆 No
or conditions?		
If Yes , please specify:		
Has another agency or lawyer	□ Yes	□ No
reviewed your case post-conviction?		
If Yes , please provide the name of		
the lawyer or agency:		
If Yes, what is the status of your file		
with that lawyer or agency?		

Part 2. The individual filling out this form if NOT the Applicant:					
Name:					
Address:					
Phone:	Home:				
	Cell:				
	Work:				
Email:					
Your relationship to the convicted					
person:					

Part 3. The Offence(s) (for which innocence is claimed):					
Offence(s) for which you were					
convicted (and claim innocence):					
Date of offence(s):					
Place of offence(s):					
Date of arrest:					
Place of arrest:					
If applicable, names of others	Name:		Guilty	Not Guilty	
charged with same offence (your co-					
accused):					
	Name:		□ Guilty	□ Not Guilty	
Did you have a criminal record,	□ Yes	🗆 No			
either as an adult or youth, prior to					
this alleged offence(s)?					

Part 4. The Trial:



City/town where trial took place:		
Type of trial:	☐ Judge alone	□ Judge and Jury
Name of Judge:		
Date of conviction:		
Date of sentencing:		
Sentence received:		
Name of trial lawyer:		
Telephone number of trial lawyer:		
Do you have trial transcripts?	□ Yes	□ No
Part 4. The Trial (continued):		
If Yes , please do <u>not</u> send transcripts	to us at this time.	
If No , do you know who - other than		
the Court or Crown Counsel – might		
have copies of the transcripts?		
In point form, please list the most sign	ificant evidence agai	nst you at trial (relied on by Crown):
What was the defence at trial? Please	provide details:	
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Part 4. The Trial (continued):			
Did you tootify at trial?			
Did you testify at trial?			
Did any other witness testify for the defence at trial?	□ Yes	□ No	
Did the alleged victim identify you?	□ Yes	□ No	
If Yes , please describe circumstances			
Did anyong alag identify you?	□ Yes	□ No	
Did anyone else identify you? If Yes , please provide details:			
ii <u>res</u> , please provide details.			
Did an expert testify?	□ Yes	🗆 No	
If Yes, please provide details as to ex	pert(s) testimony:		
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Part 5. The Court of Appeal:			
Was there an appeal from conviction?	□ Yes	□ No	
Was there an appeal from sentence?	□ Yes	□ No	
Has the appeal been heard?	□ Yes	□ No	
If Yes, when?			
Has there been a decision by the Court of Appeal?	□ Yes	□ No	
If Yes, what was the result of the appeal to	the Court of	Appeal?	
Name of appeal lawyer:			
Telephone number of appeal lawyer:			

Part 6. The Supreme Court of Canada:					
Was there an appeal to the Supreme Court of Canada?	□ Yes	□ No			
If Yes , was "leave" required to appeal?	□ Yes	□ No			
If Yes, was "leave" granted?	□ Yes	□ No			
If Yes , when?					
Has this appeal been heard?	□ Yes	□ No			
If <u>Yes</u> , when?					
Has a decision been rendered?	□ Yes	□ No			
If Yes, what was the result of the appeal to the Supreme Court of Canada:					
Name of lawyer at the Supreme Court of					
Canada:					
Telephone number of lawyer:					

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Have you applied to the Minister of Justice for	□ Yes	□ No	
a review under s.696.1 of the Criminal Code?			
If <u>Yes</u> , when?			
If a lawyer was involved, what is his or her			
name?			
If you have any contact information for this			
lawyer, please provide it here:			



Part 7. Section 696.1 application (application for review by the Minister of Justice):

What was the result of this application to the Minister of Justice?

If you have a copy of any final decision made by the Minister of Justice, please send a copy with this application form.

Part 8. Your Innocence Claim:

Please describe why you are innocent of this crime:

Part 8. Your Innocence Claim (continued):

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Part 9. Potential new evidence:

Please describe any new evidence that is available, and who we can contact about this new evidence. New or "fresh" evidence is evidence that was not available at the time of trial and which supports your claim of innocence. Examples of fresh evidence include:

- New witnesses or experts who may come forward in your defence
- Evidence that is only now available because of new scientific techniques (for example, DNA)
- Evidence supporting your innocence that the prosecution did not disclose before or at trial
- New evidence that suggests another person committed the offence
- New social science research which casts doubt on the evidence underlying your conviction



Part 10. Other exceptional circumstances:

Please describe any circumstances, other than fresh evidence, which you feel may support a claim that a miscarriage of justice occurred in your case.

If you have any additional information that has not been adequately covered in this application form, please provide that information here.

Part 11. Other available documents:

 Please list any other documents you have in your possession that might be of assistance to UBC Law Innocence Project in this review and investigation. However, please do <u>not</u> send them at this time. We will request them as necessary.

I have signed the enclosed UBC Law Innocence Project "Authorization" form: (We cannot conduct a review of this application form until the included Authorization form is signed and received.)

Name of person who completed this application form

Signature of person who completed this application form (signature must be witnessed)

Date

Name of witness

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Signature of witness