



**PUT AWAY ON FILE**  
ADMINISTRATIVE OR OPERATIONAL FILE  
Original ► NPB case file

### VICTIMS REQUEST FOR INFORMATION

The Correctional Service of Canada (CSC) and the National Parole Board (NPB) may give victims of crime information about the offender who harmed them during the offender's sentence. If you are interested in receiving information about a particular offender, please complete the following form and send it to the address that is nearest you. (Please see list of regional offices on last page of this form) You will be contacted when this request is received.

If you have questions about completing this form, please contact CSC Victim Services Division toll-free at **1-866-806-2275** or the NPB toll-free at **1-866-789-4636**.

#### PRIVACY NOTICE STATEMENT

The information you provide on this form is collected by CSC/NPB under the authority of the *Corrections and Conditional Release Act* ([laws.justice.gc.ca/en/showtdm/cs/C-44.6](http://laws.justice.gc.ca/en/showtdm/cs/C-44.6)). This information is required for the purposes of victim notification. Personal information will be protected under the provisions of the *Privacy Act* ([laws.justice.gc.ca/en/P-21/index.html](http://laws.justice.gc.ca/en/P-21/index.html)) and will be retained in the following Personal Information Bank numbers: CSC PPU 135 and NPB PPU 015. This information cannot be disclosed to other persons, without your consent EXCEPT where disclosure would be justified pursuant to one of the paragraphs of subsection 8(2) of the *Privacy Act*. You may be given access to, request correction of, or have a notation attached to the information about yourself. For more information contact **Info Source [www.infosource.gc.ca](http://www.infosource.gc.ca)**

#### SECTION A - REQUEST FOR INFORMATION

I, [enter your name here] \_\_\_\_\_, am requesting information and ongoing notification to me as a victim of crime :

I am a person who was harmed or who suffered physical or emotional damage as the result of an act by the offender.

I am requesting information on behalf of someone who is deceased, under the age of 18 or is ill/incapacitated.

Name of the Victim (if different from above) :

My relationship to the victim is:

Victim's Date of Birth \_\_\_\_\_

(YYAA-MM-DJ)

Sentencing Court, Police Department/  
Crown Office :

Court File #:

Name of Offender :

Did you provide a Victim Impact Statement for Court?

Yes

No

I would like to receive this information in the following official language :

French

English

#### SECTION B - YOUR CONTACT INFORMATION

What was your legal name at the time of the offence?

Your Date of Birth \_\_\_\_\_

(YY-MM-DD)

Mailing Address (Apt, Street, PO Box)

City/Town

Province

Postal Code

Residential Address (if different than mailing address)

City/Town

Telephone Numbers & Email

Home

Business

Cellular

Alternate

In what order should we call the above telephone numbers? Please number 1 through 4

Home

Business

Cellular

Alternate

May we leave a message on your answering machine? (i.e. our name, phone number, organization and whether or not it is urgent)

Home  Yes  
 No

Business  Yes  
 No

Cellular  Yes  
 No

Who can we leave a message with if someone else answers your phone? Please provide name(s) and relationship(s) to you.

Name

Relationship(s) to you

**SECTION C - NAMING A PERSON TO RECEIVE INFORMATION ON YOUR BEHALF (OPTIONAL)**

Complete this section if you want information to be provided to someone else on your behalf rather than receiving it directly yourself.

Agent's name or Name of Agency	Agent's relation to you (mother, friend, lawyer, victim services, police, etc.)
--------------------------------	---

Mailing Address (Apt, Street, PO Box)	City/Town	Province	Postal Code
---------------------------------------	-----------	----------	-------------

Agent's Telephone Numbers & Email				
Home	Business	Facsimile	Cellular	Alternate

**SECTION D - SUBMISSION OF STATEMENTS TO BE CONSIDERED IN DECISION MAKING (OPTIONAL)**

I would like to submit a written statement for decision-makers at the Correctional Service of Canada and the National Parole Board to consider when they are making decisions regarding this offender. **Please note that if you do submit a statement for decision-makers to consider, the Corrections and Conditional Release Act requires that it be shared with the offender. Your contact information would be removed prior to doing so.** For further information on how to prepare a victim statement, please consult the following NPB website link <http://www.npb-cncl.gc.ca/victims/guidelines-eng.shtm>

Attached  To follow

SIGNATURE	DATE (YY-MM-DD)
-----------	-----------------

**\*Note: For spouses/partners who also wish to receive information, please complete the section below.**

Print Name	Signature	Date of birth	Date of signature
------------	-----------	---------------	-------------------

**SEND COMPLETED FORM(S) TO THE CSC OR NPB REGIONAL OFFICE NEAREST YOU**  
 For more information or to obtain an additional form, please refer to either of the following websites:  
[www.csc-scc.gc.ca/victims-victimes](http://www.csc-scc.gc.ca/victims-victimes) or [www.npb-cncl.gc.ca](http://www.npb-cncl.gc.ca)

NATIONAL PAROLE BOARD Victims INFO Line 1-866-789-INFO (4636)		CORRECTIONAL SERVICE CANADA Victim Service Unit 1-866-806-2275	
Address	Victims' Information Line	Address	Victims' Information Line
<b>NPB-Atlantic Region</b>		<b>CSC - Atlantic Region</b> (New Brunswick, Nova Scotia, Prince Edward Island, Newfoundland and Labrador)	
1045 Main Street, Unit 101 Moncton, New Brunswick E1C 1H1	Toll-Free: 1-800-265-8744 OR 1-800-265-8644 OR 1-888-396-9188 OR 1-800-795-6533 OR 1-800-795-6544 Fax #: (506) 851-6926	1045 Main Street, 2 <sup>nd</sup> Floor Moncton, New Brunswick E1C 1H1	Toll Free: Sans frais: 1-866-806-2275-1-5 Fax #: (506)-851-6316
<b>NPB-Quebec Region</b>		<b>CSC - Quebec Region (serving Quebec only)</b>	
200 René Lévesque Blvd West 10th Floor, Suite 1001 Montréal, Quebec H2Z 1X4	Toll-Free: 1-877-333-4473 Fax#: (514) 283-5484	3 Place Laval, 2 <sup>nd</sup> Floor Chomedey, Laval, Quebec H7N 1A2	Toll-Free: 1-866-806-2275-2-4 Fax#: 450-967-3454
<b>NPB-Ontario/Nunavut Region</b>		<b>CSC ONTARIO Region</b> (East of Thunder Bay and within the territory of Nunavut)	
516 O'Connor Drive Kingston, Ontario K7P 1N3	Toll-Free: 1-800-518-8817 Fax#: (613) 634-3862	440 King Street West, P.O. Box 1174 Kingston, Ontario K7L 4Y8	Toll Free: 1-866-875-2225-1-3 Fax #: 613-536-4730
<b>NPB- Prairies Region - Saskatoon Office</b> (Saskatchewan, Manitoba, NW Ontario)		<b>CSC PRAIRIES Region</b> (Alberta, Saskatchewan, Manitoba, NWT, NW Ontario up to and including Thunder Bay)	
101-22 <sup>nd</sup> Street E., 6 <sup>th</sup> Floor Saskatoon, Saskatchewan S7K 0E1	Toll-Free: 1-888-616-5277 Fax#: (306) 975-5200	2313 Hanselman Place, P.O. Box 9223 Saskatoon, Saskatchewan S7K 3X5	Toll Free: 1-877-322-5822 Fax #: 306-975-5476
<b>NPB - Prairies Region - Edmonton Office</b> (Alberta and NWT)			
Scotia Place, Scotia 2 Suite 401, 10060 Jasper Ave. Edmonton, Alberta T5J 3R8	Toll-Free: 1-800-597-4397 Fax#: (780-) 495-4403		
<b>NPB-Pacific Region</b> (British Columbia, Yukon)		<b>CSC PACIFIC Region</b> (British Columbia, Yukon)	
1925 McCallum Road, 2 <sup>nd</sup> Floor, Abbotsford, British Columbia V2S 3N2	Toll-Free: 1-888-999-8828 Fax#: (604) 870-2498	32560 Simon Avenue P.O. Box 4500, 2 <sup>nd</sup> Floor Abbotsford, British Columbia V2T 5L7	Toll Free: 1-866-806-2275-1-1 Fax #: 604-870-6152