

Innocence McGill

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Innocence McGill Questionnaire

Veillez noter que ce formulaire est disponible en français.

Please respond as fully as possible to each of the following questions. Complete and accurate answers enable us to make decisions more quickly about what action(s) Innocence McGill should undertake. If you need more space to answer a question, please use the appendix at the end. Finally, if a question does not apply to your case, please indicate “N/A”. We thank you for the time and effort devoted to completing this questionnaire.

Once you have filled out the questionnaire, we ask that you please check that you have fully answered all the questions that apply to your case. You may return this document to us by mail or by email, at your convenience.

I. General Information

1. Today's date (YYYY/MM/DD): _____
2. Given or first name(s): _____

3. Surname or family name(s): _____

4. Date of birth: _____
5. Mailing address: _____

6. Telephone number(s): _____
7. E-mail address: _____
8. If you are currently incarcerated, please provide:
 - a. FPS Number: _____
 - b. Correctional Institution: _____

9. Do you currently have a lawyer? (*Yes/No*) _____

If **Yes**, please indicate the following information about your lawyer:

a. Full Name: _____

b. Law firm: _____

c. Office address: _____

d. Phone number(s): _____

1. Have you applied to other Innocence projects? (**Yes/No**) _____

For example, Innocence Canada, Projet Innocence Québec, etc.

If **Yes**, please specify which one: _____

II. Summary Information

1. Briefly describe why Innocence McGill should accept your file: _____

2. Date of the alleged incident (YYYY/MM/DD): _____

3. Date of the arrest (YYYY/MM/DD): _____

4. Name of the investigating detective: _____

a. Rank: _____

b. Police force: _____

5. Charge(s): _____

6. Name(s) of the alleged victim(s): _____

7. Were you incarcerated during your trial? (*Yes/No*) _____

III. Conviction and sentence

1. Place of conviction

a. City or Region: _____

b. Province: _____

2. Level of court: _____

For example, Quebec Superior Court, The Provincial Court of Quebec, etc.

3. Date of conviction (YYYY/MM/DD): _____

4. List of the infractions of which you were convicted:

a. Type of Offence

b. Length of Sentence

i. Conviction 1: _____

ii. Conviction 2: _____

iii. Conviction 3: _____

iv. Conviction 4: _____

v. Conviction 5: _____

5. Date of parole eligibility (YYYY/MM/DD): _____

6. Did you receive a *long-term* offender designation? (*Yes/No*) _____

If *Yes*, please specify: _____

7. Did you receive a *dangerous* offender designation? (**Yes/No**) _____

If **Yes**, please specify: _____

IV. About

1. What is your first language: _____

2. What is your highest completed level of education: _____

3. Do you have any learning disabilities? (*Yes/No*) _____

If *Yes*, please specify: _____

4. Do you have any health or other medical conditions? (*Yes/No*) _____

If *Yes*, please specify: _____

5. Did you have a criminal record before this alleged incident? (*Yes/No*) _____

If *Yes*, please fill out the section below:

a. Conviction 1:

i. Type of Offence: _____

ii. Date of Conviction (YYYY/MM/DD): _____

b. Conviction 2:

i. Type of Offence: _____

ii. Date of Conviction (YYYY/MM/DD): _____

c. Conviction 3:

i. Type of Offence: _____

ii. Date of Conviction (YYYY/MM/DD): _____

d. Conviction 4:

i. Type of Offence: _____

ii. Date of Conviction (YYYY/MM/DD): _____

e. Conviction 5:

i. Type of Offence: _____

ii. Date of Conviction (YYYY/MM/DD): _____

V. Third Party Contact Information

Please note that this section is optional

Are there any individuals who are not in prison with whom we could communicate regarding your case? It is possible that we will need to contact the persons listed below and that we will discuss your file. It is also possible that your loved ones may want to act as a bridge between yourself and Innocence McGill. Having this contact information allows us to determine who we can provide important information to.

1. Person 1

- a. Given or First Name(s): _____
- b. Surname or Family Name(s): _____
- c. Relationship: _____
- d. Telephone number(s): _____
- e. E-mail address: _____
- f. Mailing Address: _____

2. Person 2

- a. Given or First Name(s): _____
- b. Surname or Family Name(s): _____
- c. Relationship: _____
- d. Telephone number(s): _____
- e. E-mail address: _____
- f. Mailing Address: _____

3. Person 3

- a. Given or First Name(s): _____
- b. Surname or Family Name(s): _____
- c. Relationship: _____
- d. Telephone number(s): _____
- e. E-mail address: _____
- f. Mailing Address: _____

4. Person 4

- a. Given or First Name(s): _____
- b. Surname or Family Name(s): _____
- c. Relationship: _____
- d. Telephone number(s): _____
- e. E-mail address: _____
- f. Mailing Address: _____

VI. Documents Related to Your File

Would you be able to provide us with any of the following documents?

1. Transcripts from proceedings (e.g. bail hearing or preliminary hearing)? *(Yes/No)* _____

2. Trial transcript(s)? *(Yes/No)* _____

3. Police report(s)? *(Yes/No)* _____

If *Yes*, please specify which police report(s): _____

4. Laboratory report(s)? *(Yes/No)* _____

If *Yes*, please specify which laboratory report(s): _____

5. Appeal facta (i.e. written arguments)? *(Yes/No)* _____

a. Appellant (Defence)? *(Yes/No)* _____

b. Plaintiff (Prosecution)? *(Yes/No)* _____

6. Post-Conviction briefs? *(Yes/No)* _____

a. Appellant (Defence)? *(Yes/No)* _____

b. Plaintiff (Prosecution)? *(Yes/No)* _____

VII. Trial

1. Did you go to trial? (*Yes/No*) _____

If you did not go to trial (for example because you pleaded guilty), please skip to Part VII

2. Please indicate the lawyers involved in the *preliminary hearing*:

a. Your lawyer

i. Full Name: _____

ii. Law firm: _____

iii. Office address: _____

iv. Phone number(s): _____

b. Crown prosecutor:

i. Full Name: _____

ii. Office/Division: _____

iii. Office address: _____

iv. Phone number(s): _____

c. Judge:

i. Full Name: _____

3. Please indicate the lawyers involved in your *trial*:

d. Your lawyer

i. Full Name: _____

ii. Law firm: _____

iii. Office address: _____

iv. Phone number(s): _____

e. Crown prosecutor:

i. Full Name: _____

ii. Office/Division: _____

iii. Office address: _____

iv. Phone number(s): _____

f. Judge:

i. Full Name: _____

4. Did you testify at trial? (*Yes/No*) _____

If *No*, please explain why not: _____

5. Did the alleged victim(s) testify? (*Yes/No*) _____

6. Were there any legal motions? (*Yes/No*) _____

For example, Charter applications, applications to exclude evidence, etc.

If *Yes*, please list and explain: _____

7. Did any experts testify for the defence or the prosecution? *(Yes/No)* _____

For example, doctors, handwritings experts, psychiatrists, scientists, etc.

If **Yes** please provide the following information:

a. Defence Expert 1:

i. Full Name: _____

ii. Area of expertise: _____

iii. Mailing address: _____

iv. Phone number(s): _____

b. Defence Expert 2:

i. Full Name: _____

ii. Area of expertise: _____

iii. Mailing address: _____

iv. Phone number(s): _____

c. Prosecution Expert 1:

i. Full Name: _____

ii. Area of expertise: _____

iii. Mailing address: _____

iv. Phone number(s): _____

d. Prosecution Expert 2:

i. Full Name: _____

ii. Area of expertise: _____

iii. Mailing address: _____

iv. Phone number(s): _____

8. Who else testified at your trial? If there are too many to list, please include the most important witnesses and include their name, address, and telephone number. You may also use the annex to include additional witness information if need be.

Please list defence witnesses below

e. Defence witness 1:

i. Full Name: _____

ii. Mailing address: _____

iii. Phone number(s): _____

f. Defence witness 2:

i. Full Name: _____

ii. Mailing address: _____

iii. Phone number(s): _____

g. Defence witness 3:

i. Full Name: _____

ii. Mailing address: _____

iii. Phone number(s): _____

h. Defence witness 4:

i. Full Name: _____

ii. Mailing address: _____

iii. Phone number(s): _____

Please list the prosecution's witnesses below

i. Prosecution witness 1:

i. Full Name: _____

ii. Mailing address: _____

iii. Phone number(s): _____

j. Prosecution witness 2:

i. Full Name: _____

ii. Mailing address: _____

iii. Phone number(s): _____

k. Prosecution witness 3:

i. Full Name: _____

ii. Mailing address: _____

iii. Phone number(s): _____

l. Prosecution witness 4:

i. Full Name: _____

ii. Mailing address: _____

iii. Phone number(s): _____

m. Prosecution witness 5:

i. Full Name: _____

ii. Mailing address: _____

iii. Phone number(s): _____

9. Did the alleged victim identify you? *(Yes/No)* _____

If *Yes*, please describe when and where: _____

For example, at the scene of the crime, during a line up, in court, etc.

10. Did anyone else identify you? *(Yes/No)* _____

If *Yes*, please describe when and where: _____

For example, at the scene of the crime, during a line up, in court, etc.

11. Did you plead guilty? *(Yes/No)* _____

If you answered No, please skip to the next Part

12. When did you go to court and plead guilty?

13. Did you want to plead guilty, or did you want to go to trial?

14. Why did you plead guilty?

15. Did the judge ask if you understood that you were giving up your right to a trial and whether you were doing so voluntarily? *(Yes/No)* _____

16. Was your lawyer with you in court when you pleaded guilty? *(Yes/No)* _____

17. If *No*, did you ask for your lawyer? (*Yes/No*) _____

18. Did you know that you could try to withdraw your guilty plea? (*Yes/No*) _____

19. If you answered *Yes* to question 18, did you try to withdraw your plea? (*Yes/No*) _____

20. Were you aware that you could appeal the conviction and/or the sentence even if you entered a guilty plea? (*Yes/No*) _____

VIII. Plea Agreements

1. Did you make a plea agreement with the Crown? *(Yes/No)* _____

If you did not make a plea agreement with the Crown, please skip to Part IX

2. Did your lawyers talk to you about the plea agreement? *(Yes/No)* _____

If *Yes*, what did he or she say? _____

3. Did you understand the plea agreement meant? *(Yes/No)* _____

If *No*, please explain: _____

4. If English or French is not your first language, did an interpreter explain the plea agreement to you in your language of choice? *(Yes/No)* _____

5. Was the plea agreement made in writing *(Yes/No)* _____

a. If *Yes*, did you sign it? _____

b. If *Yes*, was your lawyer with you when you signed it? _____

6. Did the judge tell you that he/she was not bound by the plea agreement? *(Yes/No)* _____

IX. Appeal

1. Did you file an appeal? (*Yes/No*) _____

If *No*, why not? _____

Please explain why not even if you pleaded guilty

If you did not appeal, please skip to Part XI

2. Please indicate the following:

a) The date of decision of appeal (YYYY/MM/DD): _____

b) The case reference number or citation number: _____

3. Please indicate the lawyers involved in your appeal:

g. Your lawyer:

i. Full Name: _____

ii. Law firm: _____

iii. Office address: _____

iv. Phone number(s): _____

h. Crown prosecutor:

i. Full Name: _____

ii. Office/Division: _____

iii. Office address: _____

iv. Phone number(s): _____

i. Judge

i. Full Name: _____

4. What legal arguments were presented in your appeal? _____

5. Did your appeal include fresh evidence? (Yes/No) _____

If *Yes*, what was the fresh evidence? _____

X. Supreme Court of Canada (SCC)

1. Did you apply for leave to appeal to the SCC? *(Yes/No)* _____

If *No*, why not? _____

If you did not appeal to the Supreme Court, please skip to Part XI

2. Date of application for leave to the SCC (YYYY/MM/DD): _____

3. Was the application for leave to appeal successful? In other words, did you present an appeal to the Supreme Court of Canada? *(Yes/No)* _____

If you were not granted leave to appeal, please skip to Part XI

4. If *Yes*, please provide the following information:

a. Date of appeal judgment at the SCC (YYYY/MM/DD): _____

b. Case reference number or citation number: _____

5. Your lawyers at the Supreme Court of Canada:

a. Lawyer 1

- i. Full Name: _____
- ii. Law firm: _____
- iii. Office address: _____
- iv. Phone number(s): _____

b. Lawyer 2

- i. Full Name: _____
- ii. Law firm: _____
- iii. Office address: _____
- iv. Phone number(s): _____

6. What legal arguments were presented in your Supreme Court of Canada appeal? _____

XI. Application for Ministerial Review

1. Have you made an application under section 690/696.1? (Yes/No) _____

If *No*, why not? _____

If you have not made a 690/696.1 application, please skip to Part XII

2. Date of the s. 690/696.1 application (YYYY/MM/DD): _____

3. Who filed the application? _____

For example, was it you, your lawyer, an organization, a third party, etc.

4. If someone else submitted your application on behalf of you, please specify the following:

a. Full Name: _____

b. Organization: _____

c. Mailing address: _____

d. Phone number(s): _____

5. What issues were raised in your s. 690/696.1 application? _____

6. Has the Minister of Justice responded to your s.690/696.1 application?

If *Yes*, please indicate the following:

a. Date of decision (YYYY/MM/DD): _____

b. What was the Minister's response? _____

XII. Evidence

1. Is there evidence that was not known when you were convicted that could now help prove your innocence? (*Yes/No*) _____

If *Yes*, please describe the new evidence and why it was not considered at previous trials or during the appeals: _____

2. If applicable, why do you think the alleged victim(s) made complaints against you? _____

3. Do you have an alibi for the crime? (*Yes/No*) _____

a. If *Yes*, please describe your alibi: _____

b. Do you have some way to prove the alibi? (*Yes/No*) _____

i. If *Yes*, please explain: _____

c. Was the alibi presented at trial? (*Yes/No*) _____

i. If *No*, why not? _____

XIII. Statements and Confessions

1. Did the police ever interview you? *(Yes/No)* _____

If the police never interviewed you, skip to Part XIV

2. How many times were you interviewed? _____

3. How long were the interviews? _____

4. Did you ask to speak with a lawyer during the interview? *(Yes/No)* _____

5. When was the first time you spoke with your lawyer? _____

6. Did you sign papers during or after the interview? *(Yes/No)* _____

If *Yes*, what did you sign? _____

7. Did you make any admissions or give a confession? *(Yes/No)* _____

a. If *Yes*, please provide the following information:

i. To whom did you give the admission or confession? _____

ii. Was it a written statement? *(Yes/No)* _____

iii. If it was a written statement, did you sign it? *(Yes/No)* _____

iv. If it was a written statement, was your lawyer present? *(Yes/No)* _____

b. If *Yes*, why did you make the admission or confession?

XIV. Physical/Biological Evidence

1. Was any physical and/or biological evidence in your case? (*Yes/No*) _____
2. Were there any bodily fluids (i.e., blood, saliva, semen, etc.) or was any trace evidence (i.e., hair, fibres, etc.) obtained from the alleged victim or their clothing? (*Yes/No*) _____
 - a. If *Yes*, what samples were obtained? _____
3. Were any bodily fluids or trace evidence obtained from you or your clothing? (*Yes/No*) _____
 - a. If *Yes*, what samples were obtained? _____
4. Were any bodily fluids or trace evidence found at the crime scene? (*Yes/No*) _____
 - a. If *Yes*, what was found? _____
5. Was there any testing done on the bodily fluids or trace evidence?

If *Yes*, please specify the following information:

- a. What kind of testing was done? _____
- b. Who arranged to have the testing done? _____
- c. Who did the test? _____
 - i. Full Name: _____
 - ii. Organization: _____
 - iii. Mailing address: _____
 - iv. Phone number(s): _____
- d. What were the results of the testing? _____
- e. What did the results supposedly prove? _____

6. Was a second test done? (*Yes/No*) _____

If *Yes*, please specify the following information:

a. What kind of testing was done? _____

b. Who arranged to have the testing done? _____

c. Who did the test? _____

i. Full Name: _____

ii. Organization: _____

iii. Mailing address: _____

iv. Phone number(s): _____

d. What were the results of the testing? _____

e. What did the results supposedly prove? _____

7. Were the results of either test used at trial? (*Yes/No*) _____

a. If *Yes*, who used the evidence at trial? _____

b. If *No*, why not? _____

8. Were the results of the tests used on appeal? (*Yes/No*) _____

c. If *No*, why not? _____

9. Was testing done on all of the physical/biological evidence recovered during the investigation of your case? (*Yes/No*) _____

a. If *No*, what was recovered and not tested? _____

10. Is there any other physical evidence that you can think can be subjected to a DNA or other scientific test to help establish your innocence? *(Yes/No)* _____

If *Yes*, please provide the following information:

- a. What is this evidence? _____
- b. How can it help establish your innocence? _____
- c. Where is it? _____
- d. Was this evidence used at trial? *(Yes/No)* _____
 - i. If *Yes*, what was it used for? _____

XV. Child Sexual Abuse Cases

*If your case is not a child sexual abuse case,
do not answer the questions contained in this Part*

- 1. How many children accused you of sexually abusing them? _____
- 2. For each child, list the age at the time of the alleged abuse, gender, and your relationship to each child (for example, whether you are their father, a family friend, their aunt, etc.):

	Age	Sex	Relationship
Child 1			
Child 2			
Child 3			
Child 4			
Child 5			

- 3. How old are the children now?

Child 1: _____

Child 2: _____

Child 3: _____

Child 4: _____

Child 5: _____

4. Who did the children talk to about the alleged abuse? _____

5. Were the children's first complaints against you taped? *(Yes/No)* _____

a. If *Yes*, were the tapes used during your trial? *(Yes/No)* _____

b. If *Yes*, where are the tapes now? *(Yes/No)* _____

6. Why do you think the children made complaints against you? _____

7. Were parts of the children's stories impossible to believe? *(Yes/No)* _____

If *Yes*, please explain why: _____

8. Were child protection services involved? *(Yes/No)* _____

If *Yes*, what were the names of the social workers? _____

9. Did your lawyer or a person hired by the defence interview the children either before your trial or before you pled guilty? *(Yes/No)* _____

If *Yes*, what if anything did your lawyer tell you about the interviews? _____

10. If you went to trial, did any of the children testify against you? *(Yes/No)* _____

11. Did a doctor examine the children? *(Yes/No)* _____

a. If *Yes*, please indicate who examined them:

i. Full Name: _____

ii. Office address: _____

iii. Phone number(s): _____

b. If *Yes*, who arranged for a doctor to see the children? _____

For example, the defence, the prosecution, a member of the child's family, etc.

12. Did a different doctor do a second exam? *(Yes/No)* _____

a. If *Yes*, please indicate who examined them:

i. Full Name: _____

ii. Office address: _____

iii. Phone number(s): _____

b. If *Yes*, who arranged for a doctor to see the children? _____

For example, the defence, the prosecution, a member of the child's family, etc.

13. Was the medical evidence used at trial? *(Yes/No)* _____

a. If *Yes*, who used the evidence at trial? _____

b. If *No*, why not? _____

14. Were the children given psychological exams? *(Yes/No)* _____

a. If *Yes*, please indicate who examined them:

i. Full Name: _____

ii. Office address: _____

iii. Phone number(s): _____

b. If *Yes*, who arranged for a doctor to see the children? _____

For example, the defence, the prosecution, a member of the child's family, etc.

15. Was the psychological evidence used at trial? *(Yes/No)* _____

a. If *Yes*, who used the evidence at trial? _____

b. If *No*, why not? _____

16. Have the children accused other people of abusing them? *(Yes/No)* _____

If *Yes*, please provide the following information:

a. Who were the other people accused? _____

b. Were the other accused people convicted? *(Yes/No)* _____

17. Were you given a psychological exam? *(Yes/No)* _____

a. If *Yes*, please indicate who examined you:

i. Full Name: _____

ii. Office address: _____

iii. Phone number(s): _____

18. Were the results of your psychological exam used during the trial? *(Yes/No)* _____

a. If *Yes*, who used the evidence at trial? _____

