



Victim Impact Statement of: \_\_\_\_\_  
(name of victim)

ORIGINAL STATEMENT \_\_\_\_\_ (dd/mm/yyyy)       UPDATE \_\_\_\_\_ (dd/mm/yyyy)

### Case Identification

NAME OF ACCUSED: _____		
COURT FILE # (IF KNOWN): _____		
VERDICT ( <i>check one</i> ):	NCRMD	UNFIT
DATE OF VERDICT: _____		

**My Instructions to the Review Board:** Until otherwise instructed, I request (*check all that apply*):

- No notice of any further Review Board hearings for the accused.
- Notice of the next and any subsequent Review Board hearings
- Notice of an absolute or conditional discharge and intended place of residence of the accused
- An adjournment to prepare a Victim Impact Statement
- The opportunity to present a written statement in person at the Review Board hearing

### Statement of Relative or Guardian (where required):

I, _____ (name) have completed this statement on behalf of the victim because
_____
My relationship to the victim is: _____
Date: _____ Signature: _____

**The Review Board is required by law to provide a copy of your Victim Impact Statement to Crown counsel, defence counsel and the accused. You may be asked questions about the contents of this document.**

Please sign below to allow this Victim Impact Statement to be given to Crown counsel, defence counsel and the accused.
Signature: _____

Please attach this page to your Victim Impact Statement and deliver both by mail, fax or hand to your local Crown counsel office or the British Columbia Review Board.



Victim Impact Statement of: \_\_\_\_\_  
(name of victim)

Use this form to provide a description of the physical or emotional harm, property damage or economic loss you suffered as a result of the commission of an offence, and describe the impact of the offence on you. If you need more space, attach, number, and initial each additional page.

Your statement **must not include:**

- statements about the offence or the accused not relevant to the harm or loss you suffered;
- unproven allegations;
- comments about any offence for which the accused was not convicted;
- complaints about an individual other than the accused; or
- opinions or recommendations about the appropriate disposition that should be made.

You may wish to consider the following examples of impacts of the offence on your life:

### Emotional Impact

Describe how the offence has:

- affected your emotions and reactions;
- limited your lifestyle and activities;
- affected your relationship with your partner, spouse, friends, family, colleagues or others;
- impacted your ability to work or study; or
- required counselling or emotional support.

### Physical Impact

Describe any physical or psychological injuries or disabilities as a result of the offence, for example:

- pain, discomfort, illness, scars or physical limitations;
- medical treatment, hospitalization, surgery, physiotherapy and/or medication required; or
- future treatment that may be required.



### **Fears for Security**

Describe any fears you have for your security or that of your family and friends, for example:

- concerns with respect to contact with the accused; and
- concerns with respect to contact between the accused and members of your family or close friends.

### **Other Impacts**

Describe how the offence has caused other harm to you or your family, for example:

- time lost from work;
- relocation or medical expenses;
- temporary housing, food, child care or transportation expenses;
- damage to property

### **Drawing, Poem or Letter**

You may attach a drawing, poem or letter to help you express the impact the offence has had on you.

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**Signature of Victim**

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**Date**