



Public Prosecution Service
of Canada

Service des poursuites pénales
du Canada

Telephone: 403-299-3978
Facsimile: 403-299-3966

Alberta Regional Office (Calgary)
510, 606 - 4th Street SW
Calgary, Alberta T2P 1T1

Bureau régional d'Alberta (Calgary)
Pièce 510, 606 sud-ouest, 4^e Rue
Calgary (Alberta) T2P 1T1

File #:

ALTERNATIVE MEASURES INSTRUCTIONS TO ACCUSED PERSONS AND/OR THEIR LAWYER

You are applying for Alternative Measures. The form you have been given must be filled out completely and forwarded to The Public Prosecution Service of Canada. It should be addressed to the **Screening Unit** and can be forwarded by fax or mail as noted above or you may give your completed form to the Prosecutor handling your matter and they will forward it to our office.

You are advised to have your lawyer or duty counsel review the charges and application before you sign the application form. There is a Waiver that you must read, understand and sign (in the presence of a lawyer or duty counsel). The Waiver is to be returned with your completed application form.

You should have the application form to our office at least **two weeks** prior to your next court date for consideration. If you are approved you will be contacted by an Assistant from the Screening Unit for the Public Prosecution Service of Canada.

The minimum number of community service hours in the Alternative Measures Program is 40 hours. The number of hours may increase depending on the circumstances of your offence. The Prosecutor approving your application will assign you to the number of required hours and to a community service organization where you will be required to complete your community service hours.

You will have two weeks from the date of approval to meet with the supervisor from that organization and set up your schedule of hours. The people supervising your hours are volunteers from the community. If your attitude or performance is unacceptable you will not be permitted to complete your community service hours with that organization. If your performance is not satisfactory, you may be expelled from the program and your matter will be set down for trial.

If there are any circumstances that are relevant to your participation in the program, please indicate these on the appropriate space on the form. The Prosecutor reviewing your application will take all matters into consideration. Please ensure there is a number where either you or your lawyer can be reached.

Your case will then be adjourned for a reasonable period of time to allow you to complete your community service work. Generally, you will have three months from the time your application is approved. You must work out your schedule of expected hours with the organization that you are being directed to in order to complete all of your hours within the time period given.

You must make all court appearances as required (or have an agent appear for you) until the charge is withdrawn. If you do not attend court, the Prosecutor will request a warrant for your arrest. Once you have completed your community service work, the Public Prosecution Service of Canada will confirm that the hours have been completed. Once confirmation is received the charge against you will be withdrawn on your last court appearance.



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ADULT ALTERNATIVE MEASURES APPLICATION
REGARDING A CONTROLLED DRUGS AND SUBSTANCES ACT OFFENCE
Section 717 of the Criminal Code of Canada

TO: PUBLIC PROSECUTION SERVICE OF CANADA, Calgary
c/o The Litigation Strategy Unit

RE: Name of Accused: _____ **DOB** _____
Charges: _____
Next Court Appearance: _____
Location of Court: Provincial Court of Alberta

A. I UNDERSTAND THE FOLLOWING ABOUT ALTERNATIVE MEASURES:

1. I wish my charge to be dealt with by means of Alternative Measures, rather than by the Court.
2. I have been informed of the Alternative Measures legislation (Section 717 C.C.C.) and the program offered by the Office of the Director of Public Prosecutions.
3. I have been advised of my right to be represented by Counsel.
4. I accept responsibility for the act that forms the basis of my offence.
5. I have **not** previously participated in any Alternative Measures program.
6. I have no other outstanding charges.
7. My participation is voluntary and I fully and freely consent to participating in the program.

B. I PROPOSE THE FOLLOWING ALTERNATIVE MEASURES:

(Please check off the appropriate item)

_____ **Community Service Work**
(Note: The minimum number of hours required for this program are 40. It may increase depending upon the nature of the offence.)

_____ **Treatment for Drug Addiction**
(This is optional and may count towards a portion of your community service work.)

Please review and sign the attached **WAIVER** of liability and return it to our office with the completed application form. You must sign this Waiver in front of either your lawyer and/or Duty counsel at the Courthouse.

I **UNDERTAKE** to fulfill the above described Alternative Measures proposal, if the Office of the Director of Public Prosecutions / Public Prosecution Service of Canada agrees to accept it. I understand that upon completing the Alternative Measures the Federal Crown will apply to the Court to withdraw the charge. While completing the Alternative Measures I will attend all Court appearances required by the Court, until the charge is withdrawn.

_____ **Date**

_____ **(Signature)**

_____ **(Print Name)**

_____ **(Address - Including Postal Code)**

_____ **(Telephone Number)**

FEDERAL CROWN USE ONLY

Standing Agent Reviewer: _____ (PPSC) Reviewer: _____
Police Comments: _____ Comments: _____

Standing Agent Comments: _____ Decision: _____

Recommendation: _____ Date: _____

Date: _____

Section 717 of the *Criminal Code of Canada* states:

(1) Alternative measures may be used to deal with a person alleged to have committed an offence only if it is not inconsistent with the protection of society and the following conditions are met:

- (a) the measures are part of a program of alternative measures authorized by the Attorney General or the Attorney General's delegate or authorized by a person, or a person within a class of persons, designated by the lieutenant governor in council of a province;
- (b) the person who is considering whether to use the measures is satisfied that they would be appropriate, having regard to the needs of the person alleged to have committed the offence and the interests of society and of the victim;
- (c) the person, having been informed of the alternative measures, fully and freely consents to participate therein;
- (d) the person has, before consenting to participate in the alternative measures, been advised of the right to be represented by counsel;
- (e) the person accepts responsibility for the act or omission that forms the basis of the offence that the person is alleged to have committed;
- (f) there is, in the opinion of the Attorney General or the Attorney General's agent, sufficient evidence to proceed with the prosecution of the offence; and
- (g) the prosecution of the offence is not in any way barred at law.



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WAIVER

NAME:

Date:

I, the undersigned, will participate in the Alternative Measures Program by providing my services to a community organization or group approved by Her Majesty the Queen in Right of Canada as represented by the Public Prosecution Service of Canada. The amount of time for which my services will be provided will be determined by the amount of community service work hours set by Her Majesty the Queen in Right of Canada as represented by the Public Prosecution Service of Canada.

I acknowledge that my participation in the Community Service Work Program is part of a Court Order. I am participating, knowing that I assume all risk of death, bodily injury or damage to my property.

In consideration of acceptance into the Community Service Work Program, I hereby specifically waive any legal right of action that I have or may acquire in the future against Her Majesty the Queen in Right of Canada as represented by the Public Prosecution Service of Canada and the approved community organization, their employees and agents if I sustain bodily injury, death or property damage.

I further agree that Her Majesty the Queen in Right of Canada as represented by the Public Prosecution Service of Canada and the approved community organization will not be held responsible for any accident caused by me during the performance of my work, and I agree to indemnify Her Majesty the Queen in Right of Canada as represented by the Public Prosecution Service of Canada and the selected community organization for any loss, injury or damage caused by me.

This Agreement shall be binding upon my executors and heirs.

Dated this ___ day of _____ 20__.

Print Name

Signature of Accused

Print Name

Witness