Internal Use

## **PBC Victim Complaint Form**

## **INSTRUCTIONS**

Under the <u>Canadian Victims Bill of Rights</u> (CVBR), victims have a right to information, participation, protection and restitution. Any victim who believes that their rights under the CVBR have been infringed or denied by the Parole Board of Canada (PBC) has the <u>right to file a complaint</u> with the PBC. To file a complaint, complete this form and return it to the PBC at the address on page 2. Your complaint will be reviewed, and every effort will be made to resolve it as soon as possible. **Before submitting a complaint**, victims are encouraged to discuss any concerns or issues they may have with a PBC Regional Communications Officer (RCO), which can often be resolved informally. Please call 1-866-789-4636 (toll-free). **NOTE:** You may withdraw your complaint for any reason and at any time by writing to the PBC.

PART A - VICTIM INFORMATION				
☐ Ms. ☐ Mr.				
Last Name				
First name(s)	Maiden name (if applicable)			
Have you registered and been accepted to receive information as a victim from PBC?    Yes (Go to <b>Part C</b> )  No (Go to <b>Part B</b> )				
PART B – ADDITIONAL INFORMATION				
Address	City/Town	Province/Territory	Postal Code	
( )	( )	( )	( )	
Telephone no. / Home	Telephone no. / Business	Facsimile	Cellular phone	
Email address				
Name of offender:				
Last Name	First names(s)			
Location where offender is incarcerated or on conditional release (if known):				

Please turn this form over ->

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PART C - COMPLAINT DETAILS			
1. My rights under the Canadian Victims Bill of Rights were infri	nged or denied in respect of the following (check all that apply):		
The right to:  information participation prote	ction  restitution		
2. Please describe in detail the nature of your complaint. (Use additional sheets if necessary. You may also include copies of any documents that you feel may assist the PBC with the review of your complaint. Do not include original documents.)			
3. Please describe the resolution you are seeking through the	his complaint.		
PART D - VICTIM SIGNATURE			
Signature:	Date: LYYYYMMMDDD		
PRIVACY NOTICE STATEMENT			
The information you provide on this form is collected by PBC for the purpose You have the right to the access to, correction of, and protection of your pethrough the processing of your complaint will be stored in the Personal Info (Victims, Observers and Requests for Access to the Decision Registry) PBC a written request to the Director, Access to Information and Privacy, Parole	rsonal information under the <i>Privacy Act</i> . Personal information collected rmation Bank <i>Conditional Release Openness and Accountability</i> C PPU 015 and can be accessed and assessed for accuracy by sending		
<b>IMPORTANT NOTE:</b> If your complaint falls outside the PBC's mandate, we agency for follow-up to ensure it is dealt with in a timely manner. If you do	· · ·		
WHERE DO I SEND MY COMPLAINT FORM?			
Email: victimcomplaints@pbc-clcc.gc.ca	Mail: Victim Complaints Parole Board of Canada 410 Laurier Ave W Ottawa ON K1A OR1		