**FORM A**

[*Rule 9*]

CACR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

THE COURT OF APPEAL FOR SASKATCHEWAN

BETWEEN:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Appellant

AND:

HIS MAJESTY THE KING.

Respondent

**NOTICE OF APPEAL**

**(All Offenders)**

**A. THE APPELLANT WISHES TO APPEAL FROM:**

|  |  |
| --- | --- |
|  | CONVICTION |
|  |  |
|  | CONVICTION AND SENTENCE |
|  |  |
|  | SENTENCE ALONE |
|  |  |
|  | DANGEROUS OFFENDER OR LONG-TERM OFFENDER DESIGNATION |
|  |  |
|  | OTHER |  |
|  | (*nature of appeal other than above*) |

**B. PARTICULARS OF APPELLANT**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last name First name Middle name

Date of Birth: \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_

 year month day

If the appellant is a corporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

corporate name

If the appellant is in custody: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

penal institution

|  |  |
| --- | --- |
| If the appellant is not in custody: |  |
|  | address |
|  |  |
|  | city |
|  |  |
|  | province |
|  |  |
|  | postal code |
| Telephone: |  |
| Email address: |  |
| Fax number: |  |

**C. PARTICULARS OF CONVICTION AND SENTENCE**

1. Location of Conviction: Provincial Court \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

city or town

or

Court of King’s Bench

Judicial Centre of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

2. Name of Judge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

3. Offence(s) the offender was convicted of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Sentence imposed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Date of Conviction: \_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_

year month day

6. Date of Sentence: \_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_

year month day

**D. GROUNDS OF APPEAL**

THE APPELLANT WISHES TO APPEAL FOR THE FOLLOWING REASONS:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(This section may be expanded or additional pages may be attached.)

**E. LEGAL REPRESENTATION**

1. The Appellant is represented on appeal by:

 Name of Lawyer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last name First name

|  |  |
| --- | --- |
| Address: |  |
|  | Address |
|  |  |
|  | City |
|  |  |
|  | Province |
|  |  |
|  | postal code |
| Telephone: |  |
| Email address: |  |
| Fax number: |  |

-OR-

2. The appellant does not presently have a lawyer but intends to:

|  |  |
| --- | --- |
|  | arrange for legal representation |
|  | or |
|  | be self-represented on appeal. |

**F. PRESENCE AT APPEAL HEARING**

At the appeal hearing, the Appellant wishes to:

(*mark one only*)

|  |  |
| --- | --- |
|  | be personally present |
|  | or |
|  | appear by video conference connection |
|  | (if available at penal institution) |
|  | or |
|  | not be present. |

**G. IF A NEW TRIAL IS DIRECTED, THE APPELLANT WISHES TO BE TRIED:**

|  |  |
| --- | --- |
|  | by judge and jury |
|  | or |
|  | by single judge. |

Date: \_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_

year month day

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Signature

(Please Note: The Registrar will provide a copy of this Notice of Appeal to the Crown.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TO:** REGISTRAR

COURT OF APPEAL FOR SASKATCHEWAN

2425 VICTORIA AVENUE

REGINA, SASKATCHEWAN

S4P 4W6

Telephone: 306-787-5382

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