

Ontario Native Women's Association

GLADUE REQUEST FORM

Gladue Request Form

For Indigenous Women, by Indigenous Women

	Referral source:			
	Request for following service: Gladue	Report	Gladue Letter	Bail Letter
Date:				·····
Name of Client	:			
Does client idei	ntify as First Nation, Inuit or Métis?			
f known, name	e of client's Indigenous community:			
Client contact i	nformation & address:			
Guilty plea or fi	inding of guilt date:			
s the client in o	custody? If yes, institution name and cor	ntact infor	mation:	
Name of courth	nouse and sentencing date:			
Name and ema	il of Sentencing Judge:			
Signature of Se	ntencing Judge:			
Defence Couns	el Name:Defe	nse Coun	sel position:	
Defense Couns	el contact information (telephone, fax &	email): _		
Crown Attorney's Name:		Crown's Position:		
Crown's email:				
SynopsCPIC of	vide to ONWA: is of facts defendant's record of the Information indicating the counts	s pleaded t	to, or of which the	defendant has been found guilt o
	For Bail Le	tter Purp	oses Only	
Date and location of arrest:				
Is accused i	n custody? If yes, indicate institution:			
Name and o	contact of surety, if known:			

The Gladue Request Form must be emailed to <u>gladue@onwa.ca</u> or faxed to 1-807-623-1104. You will be contacted by the Gladue Coordinator upon receiving this request to confirm acceptance of the file.



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