**Please return completed application form to:**

The Bridge of Hope Innocence Initiative @ RMIT

School of Global, Urban and Social Studies

GPO Box 2476

Melbourne VIC 3001

Australia

**Please read our ambit before you complete this application**

**Our ambit**

1. We will only review cases where you have been convicted of a criminal offence and are claiming there are facts to support your claim that you are innocent of this offence
2. We will NOT review your case in the following circumstances:

* If your case is currently before a court
* If your claim of innocence is for a sexual offence and you have admitted sexual contact with the victim
* If your case relies on a legal defence (e.g. self-defence) or a technicality
* If your case involves risk to Bridge of Hope Innocence Initiative staff, students or volunteers
* If you have been convicted of, or have admitted, offences involving child pornography

1. We will not contact any victims of offences for which you have been convicted

**Please tell us as much as you can about your case.**

**Your details (the person who was convicted)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name |  | | | Prison |  |
| DOB |  | | | CRN |  |
| Postal address | |  | | | |
| Phone no. | |  | Email | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Are you an Indigenous Australian? | | Yes | No |
| Are you from a non-English speaking background? | | Yes | No |
| What is your first language? |  | | |
| Will you need an interpreter? | | Yes | No |
| Are you an Australian citizen? | | Yes | No |

**Details of any person who is helping you with the application**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name |  | | | | |
| Relationship with you |  | | | | |
| Postal address |  | | | | |
| Phone no. |  | Email |  | | |
| Should we contact this person if we have any queries? | | | | Yes | No |

**Details of any another person who can help with your application**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Relationship with you |  | | |
| Postal address |  | | |
| Phone no. |  | Email |  |

**Please tell us about your claim**

**What is the offence you claim you did not commit?**

|  |
| --- |
| *E.g., murder; manslaughter; armed robbery; burglary; sexual assault; rape; sexual assault with a minor; trafficking etc. We will ask you more information about this offence on the next page* |
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**Is there any evidence that can prove that you are innocent of this crime?**

|  |
| --- |
| *E.g****.,*** *do**you have an alibi? Is there any DNA evidence that can be retested to prove that you did not commit the offence? If you were convicted of a sexual assault, is there independent evidence that can confirm you did not commit the offence e.g., a witness; CCTV; DNA?* |
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*\*\* If you need more space to write, you can use the reverse side of this page.*

**Details of the offences you claim you did not commit**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| What were you charged with?  Please list all offences and be specific *e.g., armed robbery, assault,* | | Date of the offence | What did you plead for this offence?  Use x | | Were you convicted of this offence? Use x | | What was your defence for this offence? *e.g., alibi, mistaken identification* |
| 1 |  |  | Guilty | Not Guilty | Yes | No |  |
| 2 |  |  | Guilty | Not Guilty | Yes | No |  |
| 3 |  |  | Guilty | Not Guilty | Yes | No |  |
| 4 |  |  | Guilty | Not Guilty | Yes | No |  |
| 5 |  |  | Guilty | Not Guilty | Yes | No |  |
| 6 |  |  | Guilty | Not Guilty | Yes | No |  |
| 7 |  |  | Guilty | Not Guilty | Yes | No |  |
| 8 |  |  | Guilty | Not Guilty | Yes | No |  |
| 9 |  |  | Guilty | Not Guilty | Yes | No |  |

**Details of your conviction and sentence**

|  |  |
| --- | --- |
| Date of conviction |  |
| Court in which you were convicted |  |
| State: e.g., NSW |  |
| Name of judge |  |
| Total sentence |  |
| Scheduled release date |  |

**Details of appeal against conviction**

|  |  |  |
| --- | --- | --- |
| Did you appeal against your conviction? | Yes | No |
| Date of appeal against conviction |  | |
| Place of appeal *e.g., Court of Appeal* |  | |

**Details of appeal against sentence**

|  |  |  |
| --- | --- | --- |
| Did you appeal against your conviction? | Yes | No |
| Date of appeal against conviction |  | |
| Place of appeal *e.g., Court of Appeal* |  | |

**Details of any subsequent appeal**

|  |  |
| --- | --- |
| Date of subsequent appeal |  |
| Place of appeal *e.g., High Court* |  |

**Legal Contacts**

|  |  |  |
| --- | --- | --- |
| **Committal** solicitor | Name | |
| Address | |
| Email | Ph. |
| **Committal** barrister | Name | |
| Address | |
| Email | Ph. |
| **Trial** solicitor | Name | |
| Address | |
| Email | Ph. |
| **Trial** barrister | Name | |
| Address | |
| Email | Ph. |
| **Appeal** solicitor | Name | |
| Address | |
| Email | Ph. |
| **Appeal** barrister | Name | |
| Address | |
| Email | Ph. |
| **Other** (e.g., lawyers at second appeal or inquest) | Name | |
| Address | |
| Email | Ph. |
| **Other** (e.g., lawyers at second appeal or inquest) | Name | |
| Address | |
| Email | Ph. |

**Was any scientific or forensic evidence collected in your case? Would re-testing this evidence help your claim?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| What kind of scientific or forensic evidence was used?(vaginal swabs, blood, hair etc or (DNA tests etc) | | Was this evidence used at your trial? | Do you believe testing or re-testing this evidence will help prove your innocence? WHY? | Do you have copies of the results of these tests? |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |

**What other kind of evidence did the prosecution use at your trial?**

|  |  |
| --- | --- |
| What evidence did the prosecution use in your trial? *E.g., telephone records; witness statements* | Do you think investigating this evidence might help prove you are innocent? How? |
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**Was any evidence left out at your trial?**

|  |  |
| --- | --- |
| E.g., were the results of any tests (blood tests; DNA; fingerprints etc) or key witnesses left out at your trial? | Do you think investigating this evidence might help prove you are innocent? How? |
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**What was your defence at trial?**

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| --- |
| *E.g., did you argue that you had an alibi or that there was mistaken identification at trial?* |
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**Did your lawyers call any evidence to support your defence?**

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| --- |
| *E.g., If you argued you had an alibi or that there was mistaken identity, did your lawyer call an alibi witness or CCTV evidence showing that you were not present at the crime?* |
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**Please tell us how we can get your case materials**

Please cross (X) the materials that you can give us. If you do not have the materials yourself, please tell us how we can get them. *Not all the material described below will be relevant to your case.*

|  |  |  |
| --- | --- | --- |
|  | **Material** | **Where/how can we get this material?** |
| **Inquest** | Transcript of inquest |  |
| **Police**  **interview** | Video recording of your record of interview (ROI) |  |
|  | Transcript of your interview with police |  |
| **Police Brief** | Police brief of evidence/Hand up brief including: |  |
|  | * Any audio/video recordings & transcripts |  |
|  | * Scientific/medical tests & reports |  |
|  | * Photos |  |
| **Committal** | Depositions (transcript of your pre-trial hearing) |  |
| **Trial** | Transcript of your trial including verdict |  |
|  | Court documents relating to your trial |  |
|  | Exhibits |  |
|  | Sentence |  |
| **Appeal** | Court documents relating to your appeal |  |
|  | Transcript of appeal |  |
|  | Appeal decision |  |
| **Legal correspondence** | Correspondence with Legal Aid |  |
| **If you had a co-accused:** | Video recording of your co-accused’s ROI |  |
|  | Transcript of co-accused’s police interview |  |

**Are there other materials, information, or reports that we should know about?**

|  |  |  |
| --- | --- | --- |
| Other materials | Do you have this material available? | Where can we get this material? |
| E.g., telephone records |  |  |
|  |  |  |
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**Is there anything else we should know about your case?**

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

# **The Bridge of Hope Innocence Initiative at RMIT**

# **ACKNOWLEDGEMENT OF UNDERSTANDING & RELEASE OF INFORMATION AUTHORITY**

Note: This form must be completed by the person claiming wrongful conviction

* I have read the information provided about the Bridge of Hope Innocence Initiative at RMIT and I understand the role of the Bridge of Hope Innocence Initiative at RMIT in dealing with my case.
* I understand that students will be working on my case under supervision of academic staff at RMIT University.
* I understand that my relationship with the Bridge of Hope Innocence Initiative at RMIT is not a solicitor/client relationship and does not attract legal professional/client legal privilege.
* I am prepared to pay for any DNA or other forensic testing that is required in the investigation of my case.
* I understand that it may be several months before I hear back from The Bridge of Hope Innocence Initiative at RMIT.
* I authorise the Bridge of Hope Innocence Initiative at RMIT to communicate with my previous legal practitioners, and any other organisations or persons regarding my case.
* I authorise the Bridge of Hope Innocence Initiative at RMIT to obtain the release of my file/s and any other information about my case from previous legal practitioners, or any other organisations or persons, and to discuss my case with them.
* I authorise the Bridge of Hope Innocence Initiative at RMIT to share with a legal practitioner, or any other organisations or persons, any of my information necessary for an assessment of my case or a decision to accept or reject my case.
* I authorise the use of my case materials in any future research relating to wrongful convictions by staff and students in the Bridge of Hope Innocence Initiative that has been approved by the RMIT Human Research Ethics Committee.

Name (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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