

Case Reporting Form

Please note that counsel must submit a completed copy of this form with any interim or final billing.

Lawyer name:

Date:

Client name:

Client File Number:

1. Invoice Type:

Interim Billing

Final Billing

2. Stage File Opened:

Pre-Reporting to Police

During Appeal

After Police Report

During Civil or Other Non-Criminal Process

Pre-Criminal Trial

(Provide Details)

During Criminal Trial

Other

3. How were legal advice services provided (check all that apply):

Over The Phone

In-Person at Community-Based Support Services

With Video-Conferencing Services

Other

In-Person at Lawyer's Office

4. Area of Law for Services Provided (check all that apply):

Criminal

Immigration

Civil

Human Rights (Provincial)

Victim's Compensation

Human Rights (Federal)

Family Law

Other

5. Ancillary Issues (check all that apply):

Mental Health

Health

Criminal (Non-Sexual Assault)

Housing

Drug Addiction

MCFD

Poverty

Financial

Other

6. Services Provided (check all that apply):

- Initial Case Assessment
- Assist with Research
- Reviewing Documents
- Referrals to Other Resources and Supports
- Procedural and Hearing Coaching
- Other
- Negotiation/Settlement Coaching

If Referrals to Other Resources and Supports Provided, Please Provide Details:

7. Did the Client Pursue, or Intend to Pursue, any Remedy (check all that apply):

- Criminal Complaint
- Human Rights Complaint (Federal)
- Third Party Report
- Civil Litigation
- Peace Bond/ Protection Order
- Victim’s Compensation Claim
- Human Rights Complaint (Provincial)
- Other

8. Indicate Your Opinion Regarding the Following Statements:

After meeting, the client:	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree
Better understood their rights and legal options					
Was able to take some action to address the sexual assault/seek remedy					

Closing Section

Please only complete this section when submitting a final billing.

Last Service Date:

9. Stage File Closed:

- Pre-Reporting to Police
- During Appeal
- After Police Report
- During Civil or Other Non-Criminal Process
- Pre-Criminal Trial
- (Provide Details)
- During Criminal Trial
- Other

10. Closing Reason:

Advice Provided and Hours Expended	Unsuitable for Continued Service (Clinic Decision)
Conversion to Private Retainer	Abandoned by Client
Client Withdrew from Clinic	Other
Client Moved Out of Jurisdiction	
Lawyer Withdrew Services	

11. How Long Ago Did the Sexual Assault Happen (check all that apply):

Less Than 1 Year
1-5 Years Ago
More Than 5 Years Ago

12. Did the client have a support worker? Yes No Don't Know

(a) If yes, did the support worker (check all that apply):

Attend the legal consultations with the client
Communicate with you outside of the meetings (arrange meetings/documents)
Help with the efficiency of the legal services you delivered
Help the client overall

(b) Any additional information regarding your experience with the support worker on this file:

13. Did the service have a positive impact on the client or the client's case?

(a) If yes, please check all that apply:

Story of Assisting Client to Navigate Multiple Processes/Forums	Story of Client Empowerment
	Story that Elicits Empathy

(b) Please provide a summary:

14. Did the client have a negative interaction when reporting to the police? Please explain if so:

15. Did the case involve an NDA or non-disparagement clause? If yes, please explain: