Alberta Court of Justice

Virtual Bail Hearing Scheduling Form

This form is to be completed by defence counsel or duty counsel when requesting a virtual judicial interim release hearing. Please complete all required fields and answer each yes/no question. If the answer is "Yes", please provide the additional information requested.

1. Accused and File Information

Name of Accused:

Information Number(s):
If more than one, separate each number with semicolon (;)

Date of Birth:

Current Custody Facility:

2. Counsel Information

Name of Defence Counsel or Duty Counsel:

Counsel Contact Information: **Phone:** **Email:**

3. Requested Hearing Date and Time

Please provide up to three preferred one-hour time slots between 9:00 a.m. and 3:00 p.m. Hearings will not be scheduled between 12:00 p.m. and 1:00 p.m.

Preference	Date	Start Time	End Time
First Choice:			
Second Choice:			
Third Choice:			

4. Scheduling Questions

Is a surety proposed as part of the release plan? Yes / No

- If yes, provide the proposed surety's full name, date of birth, address, telephone number, and email address:

  Surety Full Name: Date of Birth:

  Address:

  Telephone Number: Email Address:

- If yes, confirm whether the proposed surety is available to attend by Webex at the requested hearing date and time: Yes / No
- If no, no further surety information is required.

Is defence counsel requesting a release plan that includes electronic monitoring? Yes / No

- If yes, confirm whether the Technical Suitability Report has been provided to the Crown in advance: Yes / No
- If no, confirm whether the report will be available to the Crown before the scheduled hearing: Yes / No

Is an interpreter required? Yes / No

- If yes, identify the language and dialect, if known:
- If yes, confirm whether the interpreter is required for the accused, a surety, or another participant:

5. Counsel Acknowledgements

☐ I confirm that I have sufficient disclosure to proceed with the bail hearing.

☐ I confirm that I have read the applicable Virtual Bail Hearing Practice Note.

☐ I confirm that I will be available and prepared to conduct the bail hearing at the scheduled time.

☐ I confirm that I will advise the Crown and the Court promptly if any scheduling issue arises.

Counsel Signature	**Date**

After completing this form, click **Submit** below or email the completed form to COJStPaul.Bail@just.gov.ab.ca. Confirmation of the scheduled hearing date and time will be sent to the email address provided above.

Submit