**Form 7.12**

20 No.

Supreme Court of Nova Scotia

Between:

Name: Applicant

and

Select:

□ Attorney General of Nova Scotia

and/or

□ Attorney General of Canada Respondent(s)

**Notice for *Habeas Corpus***

*Habeas Corpus* is available to challenge an unlawful deprivation of liberty. A deprivation of liberty can include an initial deprivation of liberty, a substantial change in conditions amounting to a further deprivation of liberty, or a continuation of the deprivation of liberty.

To be successful, you, the applicant for *habeas corpus*, must satisfy the following criteria. First, you must establish that you have been deprived of liberty. Once a deprivation of liberty is proven, you must raise a legitimate ground upon which to question its legality.

**Complete the following information in as much detail as possible. Use additional blank pages if necessary. You will be asked to affirm under oath the truth of the contents of this form by the court.**

What is the name and location of the facility at which you are detained?

[*example: “Central Nova Scotia Correctional Facility, Dartmouth”; “Springhill Institution, Springhill”*]:

What is the name of the official that notified you of the deprivation of liberty?

What date and time did your deprivation of liberty start?

What reason were you given as to why your liberty is being deprived?

Does your deprivation of liberty continue today?

□ YES □ NO

If yes, has there been any change to the terms of your deprivation of liberty between the start and the present time?

□ YES □ NO

If yes, what are those changes?

Were you given reasons as to why you continue to have your liberty deprived?

□ YES □ NO

If yes, when, how and by whom were those reasons communicated to you?

What were those reasons?

Have you been informed of any present plan for future changes to the conditions of your deprivation of liberty?

□ YES □ NO

If yes, what are those future changes and when are they scheduled to take effect?

Have you been provided with any documents that relate to the deprivation of liberty?

□ YES □ NO

If yes, when, how and by whom were those documents provided to you?

What were those documents?

Have you filed any internal grievance or appeal in respect of the deprivation of liberty?

□ YES □ NO

If yes, what is the status of the internal appeal or grievance?

Please provide any additional reasons for your application that have not been considered by the questions above:

**Grounds for review**

Why do you say that the deprivation of liberty is unlawful?

 □ The decision did not conform with the requirements of the governing legislation or regulations.

 In what way?

 □ The decision was unreasonable because it was made without evidence, or the evidence was unreliable or irrelevant or cannot support the decision.

Explain why?

□ The decision was procedurally unfair.

 Why?

□ Is there any other reason that the deprivation of liberty is unlawful?

 Explain.

**Remedy sought**

What remedy are you seeking / what do you want the court to do?

**Notice to facility and Attorney General**

At the time of submitting this notice with the Court, you must provide the complete notice to the warden or superintendent of the facility. You hereby confirm that this completed notice was provided on the date below.

**Contacting applicant**

The prothonotary (court officer) has contact information for you. The authority or persons depriving the applicant’s liberty may be contacted at the place of detention, and through other addresses, telephone numbers, fax numbers, email addresses given to the prothonotary.

**Signature**

Signed , 20

 Signature of applicant

 Print name:

 [or]

 Signature of counsel

 [name] as counsel

 for applicant [name]

 [or]

 Signature of agent approved by judge [name] as approved agent for [name]

**Prothonotary’s certificate**

I certify that this notice for *habeas corpus* was filed with the court on , 20 .

Prothonotary