

# Form No. 3

## Waiver of Solicitor-Client Privilege

Please Print

I, \_\_\_\_\_ [name],  
of \_\_\_\_\_ [city, town, municipality],  
in the Province of \_\_\_\_\_,  
was convicted for \_\_\_\_\_ [name of offence]  
in relation to \_\_\_\_\_ [specifics of offence]  
on \_\_\_\_\_ [date of conviction].

I am submitting an application under sections 696.1 to 696.6 of the *Criminal Code* for a review of this conviction.

These are the names and addresses of all counsel who represented me in court proceedings in relation to the charge and conviction:

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By signing this document, I waive any solicitor-client privilege to which these counsel are subject. They may discuss any aspect of the case with any designated representative of the Minister of Justice while my application is being assessed.



I understand that waiving my solicitor-client privilege means that my counsel:

- are allowed to discuss anything about the case that is the subject of the application with any designated representative of the Minister of Justice, and
- are allowed to disclose all forms of communication between myself and them and to provide originals or copies of correspondence, documents or anything else that is related to the case that is the subject of the application to any designated representative of the Minister of Justice.

I sign this waiver voluntarily.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness's Signature \_\_\_\_\_ Date \_\_\_\_\_

Full Name of Witness \_\_\_\_\_

Province \_\_\_\_\_