

**RCMP DISCRIMINATION AGAINST INDIGENOUS PEOPLES
CLASS ACTION**

COOPER REGEL LLP, and KOSKIE MINSK LLP are commencing a class action against the Attorney General of Canada, the Royal Canadian Mounted Police (RCMP) and other Defendants as yet unknown, arising from the RCMP's discriminatory treatment of Inuit, First Nations and Métis persons in custody and any other related causes of action.

Completing this questionnaire allows us to learn of your experiences and circumstances. A lawyer may be in contact with you to discuss the matter further. Your contact information will be added to a database so that we may contact you.

Please return this form by email: info@CooperRegel.ca
or Fax: 780-570-8467
or mail to: Cooper Regel LLP
77 Chippewa Road
Sherwood Park AB T8A 6J7

QUESTIONNAIRE

NAME (First, Middle, Last): _____

OTHER NAMES: _____
by which you have been known

ADDRESS: _____

EMAIL: _____

TELEPHONE & CELL: _____

DATE OF BIRTH: _____

WHERE WERE YOU BORN: _____

Status Non-Status Indian Métis Inuit None

PLEASE NOTE: At this time, WE ARE NOT RETAINED, and you are not our client.
This information is collected for our database for information and contact purposes only.

1.) Do you consider yourself to be visibly identifiable as an Indigenous person?

Yes ___ or No ___

2.) Is there anything we should know about the RCMP relationship with Indigenous people in your community or the area you were assaulted?

If yes, please explain: _____

3.) Please choose one that best describes the reason you are filling out this questionnaire:

___ I was a driver who was pulled over.

___ I was a passenger in a vehicle that was pulled over.

___ I was approached by the police for something other than a traffic stop.

___ The police were called as I was a victim of rape, harassment, or abuse.

___ OTHER (please explain): _____

4.) At this time were you wearing anything specific or attending an event or location that would have otherwise made it clear to the police officers that you are indigenous?

If yes, please describe: _____

5.) Please provide us the following information about the encounter:

City where the incident occurred _____

Location (street/intersection) _____

Date _____

Time of Day _____

What police department did the officer(s) work for? _____

Were you detained or arrested? _____

6.) Were there any explicit or microaggressive comments made to you about being an Indigenous person by any officer(s) or staff of the RCMP during this arrest detention or assault? If yes, please explain:

7.) If you were detained was there a concern with where you were detained?

If yes, please describe: _____

8.) Were you told why you were being detained or arrested? Yes ___ or No ___

15.) Were you asked to provide identification?
Yes ___ or No ___

16.) Were you asked to provide any other documents? Yes ___ or No ___
If yes, what documents? _____

17.) Were you questioned further? Yes ___ or No ___
If yes, please explain the type of questions asked: _____

18.) Were you searched? Yes ___ or No ___

19.) During the course of the police encounter, were you?
___ Given a verbal warning
___ Given a ticket or citation
___ Arrested

If yes to any of these things, for what offense were you warned/ticketed/arrested?

20.) Did the officer say or do anything that made you believe race played a factor in
the encounter? Yes ___ or No ___

If yes, please explain.

21.) Were there any others with you when you were stopped or approached by the
police? Yes ___ or No ___

If yes, how many _____ and what is/are their race(s)?

If yes, were they also questioned or searched?

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___ Yes, questioned

___ Yes, searched

___ No

If yes, please explain in more detail: _____

May we contact them? Yes ___ or No ___

If yes, please provide their contact information: _____

22.) Were there any other witnesses? Yes ___ or No ___

If yes, what are their names? _____

May we contact them? Yes ___ or No ___

If yes, please provide their contact information:

23.) Did you attend a Doctor/Hospital for treatment Yes ___ No ___

If Yes:

What Doctor/Hospital _____

Treated for what? _____

24.) Did you require any medical attention as a result if any injury caused by an assault by RCMP wile you were detained?

25.) Did you require any medical intervention, surgery, or procedure as a result of any injuries caused by the RCMP?

26.) Were there any longstanding physical injuries you experienced?

27.) Do you have any permanent physical scars from the injuries? Yes ___ or No ___

28.) Did you make a complaint to any agency or organization about this?

Yes ___ or No ___ If yes, to whom did you make a complaint?

What, if anything, was their response?

29.) Have you visited a counsellor/therapist/psychologist/elder or other to deal with any mental anguish as a result of any assault by the RCMP?

Yes ___ or No ___

30.) Have you received any mental health diagnosis as a result of the assault by the RCMP?

Yes ___ or No ___ If yes, please describe: _____

31.) As a result of this incident, are you doing anything differently now?

Yes ___ or No ___

If yes, please explain:

32.) Do you have any additional comments?

33.) Did you witness the abuse of any others? If so, please give full details:

34.) Did anything else Happen that you did not think was right?

35.) For the incidents you listed above, please tell us in your own words how the abuse has affected your life, education, and work history. Give as much detail as you can:

Dated at _____, this _____ day of _____, 20__.

Signature