

Calhoun County Prosecutor's Office
Activation of Rights Form
and
Victim Impact Statement
Family Court Division

RE: The State of Michigan vs _____

Case No. _____

Request for Rights

To help us understand how much you would like to be involved in the court process, please check the appropriate boxes below:

- [] I would like to be activate my rights to receive notification of scheduled court events and the outcome of this case.
- [] I would like to consult with the prosecuting attorney regarding the disposition of this case
- [] I would like to make an oral statement to the Court at the juvenile's sentencing

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

If you wish to receive notification of court events and dispositions, please remember to contact us when there is a change with the information above.

Please call Michelle at 269-969-6945.

Victim Impact Statement

According to the Crime Victim's Rights Act (M.C.L. 780.792, 780.793, and 780.794) and the Michigan Constitution, you have the right to make a written and/or oral statement to the Court at the time of disposition or sentencing. The law also dictates that the Court *shall* order that the juvenile make full restitution to any victim of the juvenile's course of conduct. The Court will NOT order restitution without the proper documentation. Please return this paperwork within the next 7 days. Cases process quickly through the Family Court and we want to ensure the Prosecutor and the Court have your information. **Please contact Michelle Matson at 269-969-6945 if you have questions.**

State of Michigan VS _____

Case Number: _____

1. How has this crime affected you and those close to you? Has this crime affected others around you? How has this crime affected your general well being? Have you or someone close to sought counseling as a result of the crime committed against you?

2. What physical injuries have you sustained as a result of this crime? You may want to write about how long the injuries lasted, or how long they are expected to last. Please discuss any changes that you have made in your life as a result of the injuries.

3. Please list any property that was damaged as a result of this crime. Be sure to include estimates and insurance information (if there is a claim).

Disposition Recommendation

4. If you feel comfortable, please tell the Court what you would like to see happen to the juvenile in this case.

I swear that the statements made here are true to the best of my knowledge

Signature

Date

If you are requesting RESTITUTION for property loss, treatment for injuries received, or any other monetary loss incurred, please fill out the Restitution Information sheet along with receipts or estimates and return it to our office within 7 days.