Victim Impact Statement for guardians of child victims

Name of guardian:

Name of child:

Name of defendant:

1. Has the child been emotionally affected by this crime? If yes, you may wish to discuss how the crime has affected the child's relationship with you, family members, and others close to them. If the child received any form of victim services such as counseling by either a licensed professional, member of the clergy or a community-support group, you may wish to mention this. Please use additional paper as necessary.

2. Was the child physically injured or hurt as a result of this crime? If yes, you may wish to write about the type of injuries the child had, what medical treatment the child received, and how long these injuries lasted or are expected to last. Please use additional paper as necessary.

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3. Has this crime affected the way the child relates to his or her friends, either at school or in the neighborhood? Has this crime affected the child's schoolwork in any way? Please use additional paper as necessary.

4. How has this crime affected you, the family, and those close to you? You may wish to write about changes that may have occurred in the family, in the ability to perform the work, make a living, run a household, or enjoy other activities you enjoyed before the crime. You may also wish to include any victim services or counseling that you and those close to the child have received. Please use additional paper as necessary. If you could, please sign, date, and return this statement as soon as possible to ensure that it is filed in time for the judge's review. Thank You.

Signature _	Date	

Relationship to Victim

Please return the statement to:

Victim Witness Assistance Program Office of the Commonwealth's Attorney 9311 Lee Avenue, Suite 200 Manassas, VA 20110

VICTIM IMPACT STATEMENT COMMONWEALTH OF VIRGINIA

How it is used

This Victim Impact Statement form gives the victim or others affected by crime(s) the opportunity to express, in writing, the impact of this (these) crime(s). This may include any economic losses, the extent of any physical or psychological injuries, and any major life changes as a result of the crime(s).

A written presentence report is prepared by a probation and parole officer to assist the judge in sentencing. This report focuses on the crime, the defendant's background, and any criminal history. Upon request of the victim, the Victim Impact Statement is included as part of the presentence report and **may be seen by the defendant**.

Because a copy of the Victim Impact Statement must be provided to the Commonwealth's Attorney or Assistant Commonwealth's Attorney (prosecutor) and the defense attorney, **at least ten days in advance of sentencing**, you are required to return the form prior to the sentencing date. The due date will be listed on the form. If there is no date listed, contact the local victim/witness program or the prosecutor.

If the judge does not order a presentence report, the prosecutor must, if the victim requests, submit a Victim Impact Statement to the court and defense attorney prior to sentencing.

The Victim Impact Statement can also provide information useful in determining court-ordered restitution. It may also be used by the Criminal Injuries Compensation Fund, which pays unreimbursed expenses of victims who suffer personal physical injury or death, as a result of a crime.

Although every effort will be made to collect any financial restitution ordered by the court, there are no guarantees of full payment. There are other options, such as contacting the victim/witness program, the probation and parole office, the prosecutor, and/or the clerk of court. Should all efforts fail to collect restitution, it may be advisable to discuss civil options with an attorney.

The information requested will assist in evaluating the effects of the crime(s). As part of the presentence report, it may also be considered by institutional treatment personnel.

Sections 19.2-264.4 and 19.2-295.3 of the *Code of Virginia* also allow crime victims, upon motion of the Commonwealth's Attorney, to testify at the sentencing hearing regarding the offense. Ask your Commonwealth's Attorney or victim/witness program staff for more information about this option.

Instructions

- Complete those sections that apply, and add any additional sheets.
- This document may be completed by a friend, relative, or advocate for the victim.
- Write neatly or type.
- Document/itemize financial losses, as a result of the crime.
- Sign and date the Victim Impact Statement form.

Helpful Hints

Below is a list of suggestions for completing a Victim Impact Statement. Ask the victim/witness program staff or the prosecutor for more assistance in completing the form.

What you should do when completing the form:

- Discuss how you felt while the crime was taking place or the emotional impact this crime has had on your life
- Discuss the physical, psychological, and financial impacts of the crime

Use specific examples of how the crime has changed your life

What you should not do when completing the form:

- Introduce new evidence not covered at the trial or repeat evidence already presented
- Use derogatory or obscene language in discussing the defendant

Additional Resources

Local Victim/Witness Programs

There may be a victim/witness program available in your community to provide information, assistance, and support. You may already have contacted the victim/witness program, but if you do not know the number of your local program, call the Crime Victim Assistance INFO-LINE at 1-888-887-3418.

Crime Victim Assistance INFO-LINE

Call the Crime Victim Assistance INFO-LINE toll free at 1-888-887-3418 Monday through Friday, 9:00 AM-5:00 PM for more information on your rights as a victim, referrals to local services, and crisis intervention, as needed. The INFO-LINE is part of the Victims Services Section of the Virginia Department of Criminal Justice Services. For further information please all (804)786-4000.

Department of Corrections Victim Services Section

Call the Department of Corrections' Victim Services Section at 1-800-560-4292 to request notice of the release, transfer, name change, or escape of incarcerated offenders in the state prison system.

Office of the Attorney General

Call the Office of the Attorney General of Virginia, Victim Notification Program at 1-800-370-0459 or (804)371-7763 to request notice of the defendant's appeal of his/her conviction and/or sentence.

THE VICTIM IMPACT STATEMENT FORM

This Victim Impact Statement form was developed by a multi-disciplinary group, convened by the Victims Service Section of the Department of Criminal Justice Services and included representatives from the Department of Criminal Justice Services, Probation and Parole, the Department of Corrections, the Supreme Court of Virginia, the Virginia Association of Commonwealth's Attorneys, judges, victim/witness program staff and crime victims.