

CSU LAW. LEARN LAW. LIVE JUSTICE. PARDON, CLEMENCY & REENTRY CLINIC INTAKE

CONTACT INFORMATION

Date/ Event:	
Name (First and Last Name):	Middle Initial:
Any other names you have used (alias, maid	en name):
Mailing Address:	
Phone Number:	Email Address:
Date of Birth:	Best method of contact:
CRIMINAL HISTORY	
Conviction(s)/Court (for example, Felonious	s Assault, Cuyahoga Court of Common Pleas):
Sentence Imposed:	
Dlog ov	Trial (circle one)
	, ,
Are you currently on supervision (probation	· · · · · · · · · · · · · · · · · · ·
• If <i>yes</i> , for how long?	
Outstanding Warrants? (Location)	
Out of State Convictions (when & where)?	
Do you have any outstanding fees/fines/resti	
• If <i>ves</i> , what is the outstanding	e amount?



BACKGROUND

Oo you have children?
- If <i>yes</i> , how many children and ages?
are you currently employed?
- If <i>yes</i> , where and length of employment:
Oo you currently have any Professional licensure/certifications?
- Please specify:
ast military service?
- If <i>yes</i> , what branch and length of service?
- What type of discharge?
substance abuse/addiction history
- Have you ever been engaged/enrolled in treatment? o If <i>yes</i> , what kind?
Length of treatment?
Have you previously applied for parole and/or other post-conviction relief in the State of Dhio?
If <i>yes</i>, when?Were you represented by counsel?
- Were you represented by counsel?
Emergency contact (Name/Phone/Email):



ADDITIONAL INFORMATION

Why are you seeking Post-Conviction Relief (e.g., pardon, expungement, sealing)?	
How did you hear about us?	
□Agency/Nonprofit Referral	
□Social Media	
□News/Television	
□Friends/Family	
□Other	
Notes/ Is there anything else you think we should know?	
Trotes, is there anything else you tillik we should know.	