

M. JODI RELL
Governor

Robert Farr
Chairman

STATE OF CONNECTICUT



TELEPHONE
(203) 805-6643

FAX
(203) 805-6630

BOARD OF PARDONS & PAROLES
55 West Main Street - Waterbury, CT 06702

Rasa Pakalnis, Hearing Coordinator
Board of Pardons
55 West Main Street, Suite 520
Waterbury, CT 06702
(203) 805-6643

Dear Petitioner,

Enclosed are forms for requesting a Non-Inmate Pardon. After obtaining your records, prepare forms as outlined on the enclosed pink sheet.

Your Pardon Application should consist of an original complete set and 5 complete identical duplicate sets; i.e. 6 fully collated sets, clipped together with binder clips **(not paper clips)**. DO NOT STAPLE IDENTICAL FORMS TOGETHER! A SET MEANS ONE OF EACH DIFFERENT FORM OR DOCUMENT.

All documents must be sent to the above address via certified U.S. MAIL. Petitions not completed in accordance with these instructions will not be presented for the Board's review at the pre-screening session.

Should the review of your petition be favorable, you will receive written notice and the date, time and location of the hearing. If you are granted a hearing, you must arrange to be in attendance unless otherwise instructed. Otherwise, you may be denied with prejudice.

Very truly yours,

Rasa Pakalnis
Hearing Coordinator
Board of Pardons

Revised 3/5/07

FOLLOW THESE PROCEDURES:

- I. **PLEASE NOTE:** A Non-Inmate Petitioner may apply to the Board after a period of FIVE (5) YEARS from the date of his/her MOST RECENT sentence together with any term of probation. If you have any questions in regards to completing your application you may call our office at (203) 805-6643.
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II. OBTAINING THE REQUIRED CRIMINAL RECORD.

In order for the petitioner to complete the enclosed forms and for this office to provide a Certificate of Pardon, if granted, it is absolutely vital that complete and accurate records be provided when the petition is filed. The following sources of information must be contacted to accomplish this.

1. **First mail the enclosed written request form to: State Police Bureau of Identification, 1111 Country Club Road, Middletown, CT 06457-9294; Tel. 860-685-8480.** Ask clerk to write the court disposition date on the computer printout. The State Police Bureau of Identification will no longer accept personally delivered requests for the computer printouts – only requests received by mail. **There is a \$25 fee. Don't mail form or fee to Board of Pardons!!**
2. **Take State Police printout to: Superior Court Records, 111 Phoenix Avenue, Enfield, CT 06082; Tel 860-741-3714.** Request a certified copy of the record. If no record is available, obtain a letter stating that fact. The Records Office requires docket numbers and disposition dates to assist you. Nominal fee is charged.
3. If you still need further information to complete your records, then go to the court where convicted or police department, i.e. Dept of Adult Probation, etc. **You must obtain a letter from the Dept. of Adult Probation indicating the date on which you successfully discharged from any period or periods of probation.**

Since the State Police Bureau of I.D. will have only printouts of offenses for which offender was fingerprinted, it is important that the petitioner provide as much recollection as possible. Proper investigation at local and state level will insure that nothing is forgotten. **Pardons will be revoked if a conviction is not disclosed regardless of the reason.** Records of out of state convictions are not required, but they must be listed in the personal statement. Advise everyone you speak with that the record is for pardon purposes.

III HOW TO PREPARE AND PACKAGE THIS PETITION:

1. For more than one offense, list the first on the **Statistical Information sheet**, then list other offenses on a separate sheet in the same format as on the form itself.
2. You must provide a personal statement. **See Paragraph # 8 of Statistical Information Sheet.**
3. *** **PETITIONS MUST SUBMIT IN THE FOLLOWING MANNER TO BE PROCESSED.**
Put together 6 sets of exactly the same information in which the petitioner has an offense record. EACH of the six- (6) sets must include one (1) copy of each of the following documents. (See (a) below):
 - a. **Affidavit & Authorization (one (1) originally signed and notarized and one (1) photocopy;** should be included at the front of the first packet which should also contain all of the original documents being submitted)
 - b. **Complete criminal record provided by Connecticut State Police.**
 - c. **Statistical Information Sheet.**
 - d. **Notarized personal statement (See Par. 8 of Statistical Information Sheet)**
 - e. **A minimum of 3 character reference letters and Reference Questionnaire. Only 1 may come from a family member related by blood or marriage. Reference letters must mention your crimes and specifically request a pardon for those convictions.**
 - f. **If petitioner served a period of probation, a copy of a letter from the Department of Probation showing the date when said probation was successfully completed/terminated must be provided.**
 - g. **Complete records**
 - h. **Submit a photocopy of Connecticut drivers license or State I.D.**
 - i. **Any other supporting documentation you wish to include – 6 copies.**

AFFIDAVIT AND AUTHORIZATION

STATE OF)

Ss: Town of _____ Date: _____

COUNTY OF)

1. That he/she is over the age of eighteen (18) years and believes in the meaning of an oath.
2. That he/she does represent under the penalties of perjury that he/she has not been convicted of any other crimes in the State of Connecticut or in any other state or federal jurisdiction in addition to those offenses listed on the attached Petition for Pardon dated _____, _____ of which this Affidavit and Authorization forms a part, and, further, that as of the date and time of this Affidavit and Authorization, he/she does not have pending against him/her in the State of Connecticut or in any other state or Federal jurisdiction any criminal actions.
3. That he/she does further represent that he/she shall bring to the attention of the Board of Pardons at the scheduled date of hearing, the existence of any additional criminal matters in which said Petitioner is involved which are pending against him/her either before or at the time of this application and/or which criminal matters have developed between the date of execution of this Affidavit and the date of the Non-Inmate Session at which Petitioner is heard by the Board of Pardons.
4. That he/she does further understand that in the event a pardon is granted to the Petitioner and it is subsequently discovered that the information provided by Petitioner on said Petition together with the representations made in this Affidavit are false, incomplete and/or incorrect, that in addition to any criminal or civil penalties that may be imposed against Petitioner because of such false, incomplete or incorrect representations, the Pardon which may have been granted to Petitioner in reliance upon the truthfulness and correctness of said representations may be revoked by this Board.

The Petitioner, _____, born in _____,
 _____, _____, _____, on _____,
 (City) (State) (Country) (Month, Day) (Year)

does fully authorize any federal, state, or local agency, court, police department, correction department, etc., to provide to the Connecticut State Board of Pardons and Paroles or its designated agent pertinent information concerning any criminal record that said Petitioner may have according to records of said agency and, in addition, to furnish a copy of said complete criminal record, if requested, to THE CONNECTICUT BOARD OF PARDONS AND PAROLES, c/o Mr. Gregory R. Everett, Chairman, Board of Pardons and Paroles, 55 West Main Street, Suite 520, Waterbury, CT 06702, or its designated agent, successors or assigns as the same may be amended from time to time. Compliance with this request is specifically authorized by me.

This Affidavit and Authorization are dated this _____ day of _____, _____, by the Petitioner who is personally known to me and who has acknowledged the same to be his/her free act and deed before me.

Petitioner's Signature

Rev. 08/18/05/DL

L.S.

Commissioner of Superior Court

Notary Public

My Commission Expires: _____

**STATE OF CONNECTICUT
BOARD OF PARDONS & PAROLES
NON-INMATE PETITION**

STATISTICAL INFORMATION SHEET

This form **must be completed** by each petitioner first before preparation of the Petition for Pardon. It will assist you in completing the Petition forms to be submitted and will serve as a useful checklist for you to verify that the application is properly completed. One copy of this form should be attached to each of the five 5 completed sets to be filed **and returned to this office**. This form will be used to make up the docket and prepare Pardon Certificates.

1. PETITIONER'S NAME AND ADDRESS (including zip code) _____
Home Telephone No: (_____) Work Telephone No: (_____) _____
EMAIL ADDRESS: _____
Aliases or other names known by: _____
2. DATE OF BIRTH: _____, 19 _____. SOC. SEC. # ____ - ____ - ____
PLACE OF BIRTH: _____
3. NUMBER OF COUNTIES WHERE YOU HAVE BEEN CONVICTED IN THIS STATE: _____
4. LIST THE COUNTIES: _____
Petitioner must provide required information for ALL CRIMINAL OFFENSES including FELONIES and/or MISDEMEANORS. Complete record must be included. Omission of information relative to any felony or misdemeanor offense **MAY RESULT IN REJECTION OF THE APPLICATION.**
5. **Have you ever been incarcerated? (Y/N)** _____
When? Where? Inmate ID#(s) List on an attached sheet of paper
6. **FOR EACH OFFENSE, LIST THE FOLLOWING:**
If more than one offense, fill in the first one on this page and attach a separate sheet listing any other convictions in the same order as below: (a,b,c,d,e,f)
 - a) Date of Arrest _____ Date of Conviction _____
 - b) Town and County of Arrest _____
 - c) Where convicted: Name of Court (Superior, Common Pleas, Circuit, GA#) _____ in the City/Town of _____ and County of _____
 - d) Court Docket No: _____
 - e) Crime convicted of (not arrested for) _____
 - f) Nature of sentence: (term, whether execution was suspended; probation period; fine imposed, if any) _____
 - g) If probation was served, date on which probation was terminated: _____, _____
7. Is this the first time petitioner is applying to the Board for a Pardon? Yes _____ No _____ If petitioner has applied previously, state number of times and dates heard _____
8. ****** SUBMIT 1 ORIGINALLY SIGNED AND ORIGINALLY NOTARIZED PERSONAL STATEMENT and five (5) copies.** Prepare a statement in your own words telling about yourself. **Explain when, how and why each crime was committed.** If you committed any other crimes in another jurisdiction, **not in Connecticut**, explain the circumstances surrounding each offense. Tell what you have done with your life since these criminal activities, explain how you have changed and for how long you have been leading a law-abiding life.

Give current background about your family life, your work or career, what you may have done for your community, why you feel you have changed your life and deserve a pardon.

9. ******PER GENERAL STATUTES OF CONNECTICUT Sec. 54-130d. (Formerly Sec. 18-27a). Testimony of crime victim at session of Board, Notification of Office of Victim Services of board's action.** (a) For the purposes of this section. "Victim" means a person who is a victim of a crime, the legal representative of such person or a member of a deceased victim's immediate family.

(b) "The Board shall permit any victim of the crime for which the person was convicted to appear before the board for the purpose of making a statement for the record concerning whether the convicted person should be granted such commutation, release or pardon. In lieu of such appearance, the victim may submit a written statement to the board and the board shall make such statement a part of the record at the session."

*****SEE ENCLOSED PROCEDURE SHEET ATTACHED FOR PACKAGING INSTRUCTIONS.*****

Date Completed: _____, _____
Month / Day Year Signature of Petitioner

Rev. 10/17/06/DL

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC SAFETY
State Police Bureau of Identification
1111 Country Club Road
Middletown, CT 06457-9294

CRIMINAL HISTORY REQUEST FOR A PARDON
(PLEASE TYPE OR PRINT CLEARLY)

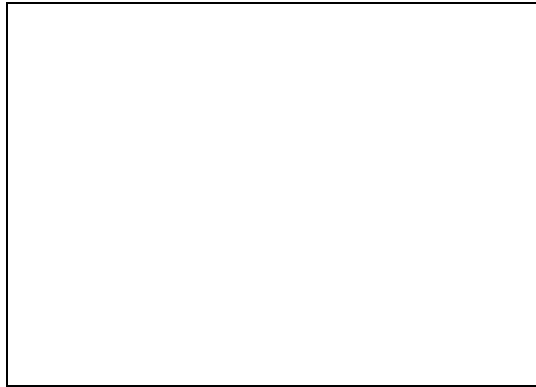
Name of Requester: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

1. Please fill in this form completely.
2. Enclose a \$25.00 check or money order payable to "Commissioner of Public Safety".
3. A fingerprint impression of your "Right Thumb" must be imprinted on this form in the space provided. You may have this fingerprint done at your local police department or you may do it yourself using an ordinary inkpad. Roll the first joint of the "Right Thumb" on the pad from right to left and repeat this process rolling the thumbprint on this form. If for any reason you must use another finger please indicate which finger you used. We must have this fingerprint to assure positive identification.

PLACE PRINT OF "RIGHT THUMB" HERE



Last Name

First

MI

(Maiden)

Date of Birth

STATE OF CONNECTICUT



BOARD OF PARDONS AND PAROLES
55 West Main Street - Waterbury, CT 06702

Applicant Name

Reference Questionnaire
(The reference questionnaire must accompany completed & attached with all character reference letters.)

Reference Name

Street Address

City, State and Zip Code

Telephone

1. How long have you known the applicant? _____, _____ Years.

Applicant Name
2. In detail please describe in what circumstances have you known the applicant.
3. What offense(s) has the applicant been convicted of?
4. In detail please give your reason(s) as to why you believe _____ deserves a Pardon.

Applicant Name

Signature of Reference

Date

Connecticut Board of Pardons and Parole

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