Pro Se Application for Review

Pennsylvania Attorney General David Sunday

Conviction Integrity Unit
Criminal Law Division – PA Office of Attorney General
833.OAG.4YOU (833.624.4968)
www.attorneygeneral.gov

Complete this application in its entirety and submit via mail, email, or digitally on our website. If an answer to a question is unknown, it may be left blank. Be sure to attach copies of any documents that support your client's application/claim. ***Do not send original documents***. Submit the completed application and ***copies*** of supporting documents to:

ADDRESS: **PA Office of Attorney General**
Criminal Law Division – Conviction Integrity Unit
Strawberry Square, 16th Floor, Harrisburg, PA 17120

EMAIL: **CIU@attorneygeneral.gov**

The Conviction Integrity Unit (CIU) only accepts cases where the below statements apply:

1. A conviction must have occurred in a county of the COMMONWEALTH of PENNSYLVANIA, except Philadelphia County - www.phila.gov, or Conviction Integrity Unit, Philadelphia's District Attorney's Office 3 South Penn Square, Philadelphia, PA 19107-3499.

2. The conviction must be for a felony.

3. The Applicant is incarcerated on the conviction in question.

4. There must be a credible claim of actual innocence (for instance, you did not commit of participate in the crime charged) which is supported by information or evidence not previously part of your original trial or guilty plea.

NOTE: Please keep in mind CIU will not review lawful sentences, affirmative defenses, claims, or evidence previously considered by and presented to the original finder of fact (jury or judge).
For example, CIS will not review cases of self-defense or consent versus rape.

Attorney Information

NAME _____ EMAIL _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER _____ FAX NUMBER _____

Acknowledgements

<u>BOTH ATTORNEY and APPLICANT must initial beside each statement</u> below to show understanding and agreement with the following:

_____ _____ We understand this request for CIU review will not affect the time alloted to pursue post-conviction remedies, such as fiing a direct appeal or PCRA. We must pursue and exhaust those remedies separately before CIU review.

_____ _____ There is no appellate or post conviction litigation pending.

_____ _____ We understand the CIU notice of receipt of my completed application does not indicate acceptance for full investigation, nor an acceptance of the claim of innocence.

_____ _____ We understand the CIU is a division in the Pennsylvania Office of the Attorney General. The CIU personnel are not defense attorneys, do not represent me, and do not provide legal advice.

_____ _____ We understand we are providing information to a prosecutor's office and that any statements are provided voluntarily.

_____ _____ No one has promised us anything to complete this application.

_____ _____ We understand the CIU will only communicate with the attorney submitting this application.

_____ _____ We understand the CIU reviews cases based on its own standards and our case may or may not be reviewed or investigated.

_____ _____ We understand the CIU may contact any of the people or witnesses provided in this application.

_____ _____ I, the Applicant, through my attorney, understand and waive any applicable privilege to the information I provide, including but not limited to, the attorney-client privilege.

_____ _____ Any false statements herein can be used against my client.

_____ _____ I, the Applicant, through my attorney, provide my attorney and former attorneys consent to share all information from their files with the CIU.

_____ _____ I, the Applicant, through my attorney, give the Pennsylvania Innocence Project or any other innocence organization permission to share all information they may have with the CIU.

Applicant Information

NAME | DOC NUMBER | DATE OF BIRTH

SCI FACILITY | COUNTY OF CONVICTION | DOCKET NUMBER

RACE and ETHNICITY:
(Please mark all that apply)

- ☐ Alaska Native
- ☐ Asian
- ☐ Black
- ☐ Hispanic
- ☐ Native American
- ☐ Pacific Islander Prefer
- ☐ White
- ☐ Other
- ☐ Prefer Not To Specify

Case Information

DATE CRIME OCCURRED | DATE OF ARREST | CRIME(S) CONVICTED OF

SENTENCE(S) IMPOSED | DATE OF SENTENCE/CONVICTION

Please list all the Attorney(s) who have previously represented you:

How were you convicted? (MARK ALL THAT APPLY)

☐ JUDGE/BENCH ☐ JURY TRIAL ☐ GUILTY PLEA ☐ NO CONTEST PLEA

Please check every box that applies. If none apply, check the box saying *"None of the above statements apply"*.

- ☐ Applicant had no role in the crime I was convicted of.
- ☐ Applicant did some, but not all, of crime(s) convicted of.
- ☐ Applicant did something illegal because they were forced to do it by someone else.
- ☐ Applicant did something illigal under duress.
- ☐ Applicant suffers from a medically diagnosed condition affecting competency that existed at the time the crime was committed. MEDICAL RECORDS MUST BE ATTACHED.
- ☐ None of the above statements apply.

Prior Post-Conviction Appeals

Are there any active appeals or post-conviction motion? ☐ Yes ☐ No

If yes, please provide the case number: _____

Have any post-conviction motions been filed before in this case? ☐ Yes ☐ No

If yes, please provide case information: _____

Prior DNA Testing

Was DNA evidence used at trial? ☐ Yes ☐ No

If yes, by whom? ☐ Commonwealth ☐ Defense

Have you filed a motion for DNA testing under state law? ☐ Yes ☐ No

Was the motion granted? ☐ Yes ☐ No

Was testing done? ☐ Yes ☐ No

Contact with Innocence Organizations

Has contact been made with the Pennsylvania Innocence Project about your case? ☐ Yes ☐ No

If yes, are they currently investigating? ☐ Yes ☐ No

Has any other innocence organization/project been contacted about this case? ☐ Yes ☐ No

If yes, which organization(s) and when? _____

_____

_____

New Evidence or Evidence of Innocence

Please check the box for each statement you believe applies to this case. You may check as many boxes as needed. If none apply, check the box saying *"None of the above statements apply".*

☐ A witness/informant who testified has recanted or changed their testimony.

☐ Applicant was not at the crime scene and has an alibi not previously available.

☐ There was scientific testimony at trial that was wrong or has been discredited.

Briefly explain what testimony: _____

☐ There is expert testimony at trial that was wrong or has been discredited.

Briefly explain what testimony: _____

☐ The arresting officer or an officer that presented testimony was arrested.

Name of Officer and Badge Number: _____

☐ There is DNA evidence that was never been tested.

☐ There is new evidence that proves innocence that wasn't available at trial or entry of plea.

Briefly explain what evidence: _____

_____

_____

☐ None of the above statements apply.

Questions About Scientific Evidence

Please check the box for each statement you believe applies to this case. You may check as many boxes as needed. If none apply, check the box saying *"None of the above statements apply"*.

- ☐ The Commonwealth presented a "shaken baby" case.
- ☐ The Commonwealth presented an expert to prove arson.
- ☐ The Commonwealth used bite mark evidence.
- ☐ The Commonwealth used hair comparison evidence.
- ☐ None of the above statements apply.

Information About Other Evidence

Please check the box for each statement you believe applies to this case. You may check as many boxes as needed. If none apply, check the box saying *"None of the above statements apply"*.

- ☐ Applicant testified at trial.
- ☐ Police claimed a confession was given but applicant denies.
- ☐ Allegation of coerced confession.
- ☐ An eyewitness or victim didn't know the applicant but identified them as the person committing the crime.
  If applicant was identified, which of the following fit how they were identified:
  - ☐ An eyewitness or victim identified applicant from a show-up.
  - ☐ An eyewitness or victim identified applicant from a photo array or photo line-up.
  - ☐ An eyewitness or victim identified applicant from a live line-up.
  - ☐ An eyewitness or victim identified applicant for the first time in court.
- ☐ The witness or informant who testified against applicant lied.
- ☐ Police said they found applicants fingerprints at the crime scene.
- ☐ Police said they found applicants hair at the crime scene.
- ☐ Police said they found applicants blood at the crime scene.
- ☐ Police said they found applicants body fluids semen, spit, sweat at the crime scene.
- ☐ Police said the victim's DNA was on applicant.
- ☐ Police said applicant had the victim's property or other belongings.
- ☐ The witness or informant who testified against applicant had a deal with the Commonwealth that was just learned about.

  Please explain details of cooperation and how discovered: _____

  _____
- ☐ None of the above statements apply to me.

Information About New Evidence and Innocence

Please answer these questions below, including as much information as you know. If you need more space, use a separate piece of paper.

Please explain the bases for innocence in detail:

Please list names, contact information and relationship to Applicant of witnesses or any other person with relevant information or alibis, and any other person whom should be contacted supporting the claim.

Please provide any new information about the case that was not known at the time of conviction.

FOR THE CONVICTION INTEGRITY UNIT TO REVIEW THIS APPLICATION, PLEASE EXECUTE AND DATE BY SIGNING BELOW:

1. I, the Applicant, give my attorney consent to file this application on my behalf;
2. I, the Applicant, fully understand the terms and conditions contained int he application after consulting with my Attorney; and
3. I, the Applicant, verify the information provided is true and accurate to the best of my knowledge and I may be held liable for any unsworn falsification provided herein pursuant to P.a.C.S. 18 § 4904.

ATTORNEY FOR APPLICANT SIGNATURE | DATE

APPLICANT SIGNATURE | DATE