



Douglas A. Ducey
Governor

C.T. Wright
Chairman

ARIZONA BOARD OF EXECUTIVE CLEMENCY

1645 West Jefferson Street, Suite 101

Phoenix Arizona 85007

Phone: (602) 542-5656 / Fax: (602) 542-5680

PARDON APPLICATION
ARS § 31-441 and ARS §31-442

HOW TO APPLY FOR A PARDON

1. Review the Pardon Instruction Sheet to ensure you have completed all the required steps. After the documents are received, complete the pardon application and have your signature page notarized.
2. We strongly prefer that you use a binder clip to submit your pardon package. Please ensure that each document has your name and date of birth on it and arrange your petition in the following order.

Required:

- a) Original pardon application, with signature paged notarized and one (1) copy of the notarized application.
- b) Copy of your Absolute Discharge, Restoration of Civil Rights, and/or Conviction Set Aside Court Orders.
- c) One copy of the presentence report and court sentencing documents (minute entries) for each cause number.
- d) Documentation that all court fees and restitution has been paid. If you owe or previously owed child support, provide proof that you are current in payment or the order has been satisfied
- e) Affidavit of Publication in county of conviction, if applicable.
- f) Green card return receipts from the certified mailing to the County Attorney in county of conviction, if applicable
- g) Copy of your most current resume.
- h) A minimum of 3 letters of support. At least two references must come from a person who is not related to you by blood or marriage.
- i) Any other documentation you wish to include for the Board to consider (certificates, resumes, evaluations etc.)
- j) Two (2) recent sets of fingerprints

Send the documents via mail to:

Arizona Board of Executive Clemency
1645 West Jefferson, Suite 101
Phoenix, Arizona 85007

Applications are received and processed continuously on a first come first served basis. Due to the high volume of petitions received,

NO APPLICATIONS WILL BE PROCESSED IF ANY REQUIRED DOCUMENTATION IS MISSING. It is highly recommended that you make a copy of the package for your personal records, as we will not return what is submitted. You may choose to use Certified mail/return receipt if you would like to verify the date the Board receives your package. We are not responsible for petitions that are lost if they are not submitted via certified mail. If you have any questions, please call our office at (602) 542-5656.

APPLICATION FOR AN ARIZONA GOVERNOR'S PARDON

Please type (strongly preferred) or print legibly in ink the answers to the following questions. If the space for any answer is insufficient, please continue the answer on another sheet of paper and label the corresponding section that you are continuing. Each question must be answered fully, truthfully, and accurately.

Any omission or falsification may constitute grounds for denial or revocation.

SECTION 1: Applicant Information:			
Last Name	First Name	Middle Name	
<input type="checkbox"/> Imminent Danger of Death: Check this box if you are applying for a pardon based on Imminent Danger of Death. *ATTN TIME COMPUTATION UNIT: IF APPLYING UNDER IMMINENT DANGER OF DEATH AND THE APPLICANT HAS BEEN DEEMED STATUTORILY ELIGIBLE, PLEASE FORWARD THIS APPLICATION TO THE ARIZONA DEPARTMENT OF CORRECTIONS HEALTH SERVICES. "IMMINENT DANGER OF DEATH" means that an applicant has been examined by a medical doctor and that doctor has diagnosed the applicant as suffering from a medical condition which, in the doctor's professional medical opinion, will to a reasonable medical certainty result in the applicant's death within six (6) months. Imminent Danger of Death shall only apply for those applicants that are currently incarcerated."			
Date of Birth:	Place of Birth	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
ADDRESS (Number and Street):		Apartment Number / Floor	
CITY:		STATE:	Zip Code:
HOME PHONE NUMBER: ()		BUSINESS PHONE NUMBER: ()	EXTENSION:
CELLULAR PHONE NUMBER: ()		E-MAIL ADDRESS:	
SECTION 2: Family Information			
For your current residence, please list all members of your household below:			
Name:	Age:	Relationship:	
1.			
2.			
3.			
4.			
5.			
How long have you lived at your current address?			
Current Marital Status:	<input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widow <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widower		
Current Spouse / Partner's Name	Current Address (if different from your current address)		Current Phone Number
How many children do you have?			
Are you current with all court ordered child support (if applicable)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable			
If you answered no, what is the reason for your failure to pay and describe any agreement you have made to satisfy your payment obligation:			

SECTION 3: Aliases and Other Names

State in full every other name by which you have been known, including the reason for your use of another name, and the dates during which you were so known (i.e., include your maiden name, name by a former marriage, aliases, and nicknames):

- 1.
- 2.
- 3.

SECTION 4: Previous Application History

Have you applied for pardon in the past? ☐ Yes ☐ No

If yes, please state the month(s) and year(s) you applied:

Was a pardon granted? ☐ Yes ☐ No If yes, type of Pardon granted:

The date the Board suggested you may reapply:

SECTION 5: Citizenship Information:

Are you a citizen of the United States of America? ☐ Yes ☐ No

If you answered no, country of citizenship:

SECTION 6: Gun Rights Restoration:

If a pardon is granted, are you requesting the pardon to restore gun rights. ☐ Yes ☐ No

If yes, please explain why you are seeking to possess a firearm:

SECTION 7: Educational Background:

Please check the highest grade completed:

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20	<input type="checkbox"/> 21	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24+

Please list any education or other special training you have received or are currently attending. Include the school name, dates attended, degrees received, and any honors achieved. If you attended training, note the type of training and agency that provided the training. You may also attach a copy of any certificates, diplomas or transcripts received to the application.

SECTION 8: Military Record:

Were you ever in any branch of the U.S. Armed Forces? ☐ Yes ☐ No If you answered yes, please answer the following:

Branch of service: Date of entry into active duty: Date of Discharge:

Did you serve in the National Guard? ☐ Yes ☐ No Type of Discharge: Rank at Discharge:

SECTION 9: CRIMINAL HISTORY

Have you ever been incarcerated in Arizona ☐ Yes ☐ No Inmate Number (if known):

Do you presently have any outstanding warrants, either federal or state? ☐ Yes ☐ No If yes, state the pending charges, the arresting agency, and the court in which the case is pending. If you need more space, use the optional continuation page.

SECTION 9: CRIMINAL HISTORY

List all felony and misdemeanor (excluding traffic violations except DUI) convictions as an adult. **Please note the conviction(s) which you are seeking a pardon.** Any willful omission will be construed as falsification, and would be considered grounds for denial. Applicants should rely on their own information, as well as the official criminal record that was obtained from the local Police. If any uncertainty exists, a statement to that effect will remove grounds for rejection of the application on the basis of falsification. List your most recent conviction below, working back until all your convictions are listed. *If you need more space, please use the "Criminal History (Attachment)" form attached to this application.*

Conviction #1 (most recent conviction)

CR number:	Disposition Date:	Sentence:
Crime(s) Convicted of on this docket:		
<input type="checkbox"/> Yes <input type="checkbox"/> No I am seeking a pardon from this conviction.		
In your own words, provide a complete and detailed account of this incident. Explain when, how and why each offense was committed, including the date and location. Explain any violations of probation if applicable.		

Conviction #2

CR number:	Disposition Date:	Sentence:
Crime(s) Convicted of on this docket:		
<input type="checkbox"/> Yes <input type="checkbox"/> No I am seeking a pardon from this conviction.		
In your own words, provide a complete and detailed account of this incident. Explain when, how and why each offense was committed, including the date and location. Explain any violations of probation if applicable.		

Conviction #3

CR number:	Disposition Date:	Sentence:
Crime(s) Convicted of on this docket:		
<input type="checkbox"/> Yes <input type="checkbox"/> No I am seeking a pardon from this conviction.		
In your own words, provide a complete and detailed account of this incident. Explain when, how and why each offense was committed, including the date and location. Explain any violations of probation if applicable.		

☐ Check this box if you have more than 3 criminal convictions and have attached additional sheets using the same format as above.

Have you ever been convicted of any crimes in any other State? ☐ Yes ☐ No

If yes, list the State where convicted, the approximate date of conviction, what crime you were convicted of and describe the incident. If you need more space, please continue on another piece of paper and label the section that you are continuing in the same format.

Have you had any arrests with any law enforcement agency since your last sentence? ☐ Yes ☐ No

Please explain:

SECTION 10: Employment History

List your past 3 employers, starting with your present employer and working back. For each period you were unemployed, give dates of that period and reason. **(Not required but an attached current pay stub or W-2 form will verify present employment to the Board)**

Official Job title (Start with current or most recent job)	Company Name & Phone Number	Type of Business
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Employed From (Mo.) (Yr.)	To: (Mo.) (Yr.)	Total (Years. Mos.)	Hours Worked Per Week	May we Contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Business' full address			Reason for Leaving (if currently unemployed)	

Official Job title		Company Name & Phone Number		Type of Business
Employed From (Mo.) (Yr.)	To: (Mo.) (Yr.)	Total (Years. Mos.)	Hours Worked Per Week	May we Contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Business' full address			Reason for Leaving	

Official Job title		Company Name & Phone Number		Type of Business
Employed From (Mo.) (Yr.)	To: (Mo.) (Yr.)	Total (Years. Mos.)	Hours Worked Per Week	May we Contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Business' full address			Reason for Leaving	

SECTION 11: Substance Abuse and Treatment Information:

Have you ever been addicted to or abused alcohol or drugs of any type? ☐ Yes ☐ No

If yes, describe the type and dates of the addiction or abuse:

Do You Consider Yourself in Recovery? ☐ Yes ☐ No How are you maintaining your sobriety?

Have you ever sought or participated in counseling, treatment, or a rehabilitation program for drug use or alcohol abuse (i.e. AA, NA, 12 Step Programs etc.)? ☐ Yes ☐ No

If yes, specify the dates of treatment or counseling, and provide the full name, address, and telephone number of the treatment facility and of the doctor, counselor, or other treatment provider. Indicate whether you completed the treatment program and the description of help received. Attach any certificates or proof of participation to the end of this package.

Is there any other treatment you have participated in that you would like the Board to know about? ☐ Yes ☐ No

If yes, specify the dates of treatment or counseling, and provide the full name, address, and telephone number of the treatment facility and of the doctor, counselor, or other treatment provider. Indicate whether you completed the treatment program and the description of help received. Attach any certificates or proof of participation to the end of this package.

SECTION 12: Volunteer, Charitable and Community Activities

Describe any charitable, volunteer, church or civic activities in which you have been engaged or other contributions you have made to the community since you have completed your sentence. List the names of any organizations in which you have participated, the time periods of your participation, your role in these activities, and the name, address, and telephone number of a person associated with each organization who is familiar with your involvement. If you need more space, please continue on another piece of paper and label the section that you are continuing in the same format.

SECTION 13: Purpose of Application:

1. State your reason(s) for seeking a pardon. If you need more space, please continue on another piece of paper and label the section that you are continuing in the same format.

2. In your own words, how have you changed since your criminal activity? You may also use this section to inform the Board about anything else that you would like the Board to consider. If you need more space, please continue on another piece of paper and label the section that you are continuing in the same format.

3. Since your completion of the most recent sentence, what do you consider your most significant achievement? Why? If you need more space, please continue on another piece of paper and label the section that you are continuing in the same format.

4. What are the specific factors you would relay to the Governor to convince her that you are deserving of a pardon? If you need more space, please continue on another piece of paper and label the section that you are continuing in the same format.

Has anyone else assisted you in completing this pardon application? ☐ Yes ☐ No

If you answered yes, complete the following information about the person / group:

Name / Group	Address	Phone Number

Do you plan to attend your pardon hearing? Yes ☐ No ☐

Is so, will your attendance by: In-Person ☐ Phone ☐

**PARDON APPLICATION
SIGNATURE PAGE**

This is to certify that I have applied for a Governor's pardon with the Arizona Board of Executive Clemency and have completed this application fully, truthfully, and accurately.

Dated this _____ day of _____, 20____

Applicant Signature

Subscribed and Sworn before me this _____ day of _____, 20____

Signature of Notary

My Commission Expires on: _____
(Notary Seal)

CRIMINAL HISTORY (Attachment)**Conviction History #**[illegible]

Conviction

[illegible]**Conviction #**[illegible]



ARIZONA BOARD OF EXECUTIVE CLEMENCY

Frequently Asked Questions Regarding the Pardon Application

WHAT IS AN ARIZONA GOVERNOR'S PARDON? An Arizona Governor's pardon is the ultimate relief from the penalties and disabilities associated with a criminal conviction. It is an honor and a privilege that is reserved for those who have demonstrated crime free behavior for a period following a criminal conviction. Obtaining a pardon is a distinct achievement and the applicant should demonstrate to the Board of Executive Clemency that they have earned the Governor's consideration. You will be asked to explain why you are seeking a pardon. It should be more than simply stating that you want to "clear your record." **NOTE:** You do not need a Governor's pardon to reclaim your right to vote or obtain gun rights. Your rights MAY BE restored after successfully completing your sentence and applying to the Sentencing Court for a "Restoration of Civil Rights." To obtain further information or forms, contact or visit the website of the Superior Court's Clerk of the Court within the county of your conviction.

WHO CAN GRANT A PARDON? Only the Governor can grant a pardon, but first it must be reviewed and recommended to the Governor by the Board of Executive Clemency. The Board has the exclusive authority to hear the individual requesting the pardon. If the majority of the Board votes affirmatively, the recommendation will be forwarded to the Governor for a final decision. Following a recommendation from the Board of Executive Clemency, the Governor has complete discretion in deciding whether to grant a pardon. Please note, a pardon is not granted to every person who applies.

WHAT ARE THE BENEFITS AND LIMITATIONS OF A PARDON? Simply put, an Arizona Governor's pardon restores many of the rights of citizenship that someone loses through criminal conviction. This does not include the right to bear arms, unless specifically authorized to do so in the pardon. A pardon sends a very powerful message to society that you have led a useful, productive and law-abiding life following your conviction. Most individuals seek pardons for either personal satisfaction or for professional licensing, bonding or other employment purposes. However, a pardon may not guarantee employment within a sought career field. A Governor's pardon may enhance your opportunities for employment but **DO NOT** assume the pardon will make you eligible for employment. If you are considering applying for a pardon in order to obtain a particular type of employment or a license, you should first check with the employer or licensing agency to see if it would be helpful to do so.

DOES A PARDON EXPUNGE MY CRIMINAL CONVICTION? A Governor's Pardon does not provide complete relief from all legal penalties and disabilities. **In Arizona, a pardon does not expunge a criminal conviction.** Here are some limitations and restrictions:

- Because a Governor's Pardon doesn't seal or destroy your criminal arrest record, you must still report your criminal arrests and convictions when asked if you have any arrests or convictions. You can, however, state that you have since been pardoned.

- An Arizona Governor cannot pardon a conviction that you suffered in another state or in federal court.
- A Governor's pardon doesn't necessarily avoid or prevent immigration issues such as deportation or removal.

WHO IS ELIGIBLE FOR A PARDON? Anyone **convicted** of a felony in the State of Arizona can apply for a pardon. The conviction(s) for which the pardon is being requested must be specifically stated. If the applicant is currently incarcerated within the Arizona Department of Corrections, he/she must be deemed statutorily eligible to apply for a pardon. The Time Computation Unit at the Arizona Department of Corrections will make that determination regarding eligibility.

WHAT DOES THE BOARD CONSIDER WHEN DETERMINING YOUR APPLICATION FOR RECOMMENDATION TO THE GOVERNOR? Once all your required paperwork has been submitted and your hearing has been scheduled, Board members will review your paperwork and conduct a hearing with you. Here are some of the factors that they **MAY** consider:

- Reasons for pardon;
- Nature of the offense;
- Amount of time that has passed since completing the sentence;
- Applicant's overall criminal history and any subsequent arrests;
- Whether the sentencing court granted a "Conviction Set-Aside and/or Restoration of Civil Rights";
- Your rehabilitation efforts while incarcerated and following your release;
- Whether the applicant is delinquent on any outstanding fees, restitution and/or other obligations, i.e. traffic tickets, child support payments
- Your disciplinary record while in jail / prison and while on probation / parole,
- Community contributions since release from sentence; and
- Reference letters submitted in support of application.

WHAT IS THE APPLICATION PROCESS? Seeking a Governor's pardon is a lengthy and time consuming process. Applicants are required to make a written request to the Board of Executive Clemency. Upon receipt of the request, the Board staff will provide you a packet of information detailing the requirements and the application. It is imperative that you read the instructions carefully and obtain all the required supplements. You will not be scheduled for a hearing until all the necessary documentation has been received. For further information please see the Board's detailed instructions located on the website at www.azboec.gov and in the application package.

IF THE BOARD VOTES AFFIRMATIVELY OR NEGATIVELY FOR A RECOMMENDATION TO THE GOVERNOR, WHAT HAPPENS NEXT? If the vote is affirmative, one of the Board members will draft a letter to the Governor requesting consideration that you be granted a pardon. This letter must outline the compelling reasons for the Board's recommendation. You will receive a copy of this letter. The Governor may respond to this recommendation at any time. There are no designated timeframes.

If the Board votes not to recommend a pardon for an applicant or if the governor denies a pardon, the applicant may apply again for a pardon in **three (3) years** from the date of the Board's decision.

ARIZONA GOVERNOR'S PARDON INSTRUCTIONS

The following is the required steps and documentation for a completed pardon application.

1. The application **MUST** be fully completed with detailed responses to all questions. You may use additional paper if necessary. **Submit one original and four (4) copies of your application and any other additional paperwork you are enclosing for the Board's review.**
2. You **MUST** provide two (2) recent sets of fingerprint. The fingerprint cards are included in this packet. Fill in fields marked on both cards. You can obtain your fingerprints from your local law enforcement agency or Department of Public Safety office in the county of residence. You must use the cards included in this packet due to the ORI number on them. Be sure to sign your card and have the official taking the fingerprints sign and date the card. Your fingerprints must be on the cards when returned with your completed application.
3. A.R.S. §31-442 requires you to publish your intention to seeking a pardon for your conviction (See Example A below). This is published in the county where you were convicted and must run for 30 straight days. The newspaper will provide you with an Affidavit of Publication. The affidavit **MUST** be included with your completed application. *If you have reached your sentence expiration date or are within 10 days of expiration and/or are no longer on probation, you do not need to submit this information.*
4. You **MUST** provide a certified notice of your intent to seek a pardon to the prosecutor (county attorney) in the county in which you were convicted. (See Example B below) Please include the green card return receipts from the certified mailing. *If you have reached your sentence expiration date or are within 10 days of expiration and/or are no longer on probation, you do not need to submit this information.*
5. You **MUST** provide a copy of the Presentence Report and Court Sentencing documents (Minute Entry) for each case number. You will need the case number in order to request your records from the sentencing court.
6. It is **recommended** that you provide a copy of your most recent resume.
7. It is **recommended** that you provide a minimum of 3 letters of reference. Only 1 reference should come from a family member who is related by blood or marriage.
8. You may submit any other documentation you wish to include for the Board to consider (certificates, evaluations, etc.)
9. Prior to seeking a pardon, you are encouraged and highly recommended to obtain and provide a copy of your **Restoration of Civil Rights, Absolute Discharge** and/or **Conviction Set Aside** by the court in the county of conviction.

Please refrain from two-sided copies and submissions in pencil or red ink. Once you completed these steps and have all the necessary documentation, please return your package to:

Arizona Board of Executive Clemency
1645 W. Jefferson Suite 101
Phoenix, Arizona 85007
602-542-5656

EXAMPLE A

COUNTY ATTORNEY IN

_____ COUNTY

_____ ARIZONA

Dear Sir:

In compliance with A.R.S. § 31-442, I hereby serve you notice of my intention to make application to the Arizona Board of Executive Clemency for a Pardon and restoration of rights.

Please notify the Arizona Board of Executive Clemency that you have received this notice.

Respectfully,

(Your signature)

EXAMPLE B

Notice is hereby given that I, _____ am making application to the Governor of the State of Arizona and the Arizona Board of Executive Clemency for a pardon from my conviction in the county of _____, State of Arizona, Superior Court (date of conviction).

Applicant currently resides in _____ county for the past _____ years from _____ and has not been involved in any infractions of the law.

(Name) _____

(Address) _____

Published: _____
(Date published)
