

INSTRUCTIONS

An application for clemency does not guarantee that the request will be granted.

The Parole Board must review all applications and make a recommendation to the Governor. Please do not call the Parole Board concerning the results; you will be notified by mail.

The Governor does not review files taken out of order. There is no appeal process for Clemency. If the Governor denies the application, that decision is final.

Follow all instructions and answer all questions truthfully.

INCORRECT or INCOMPLETE information will be grounds for return of your application.

PLEASE COMPLETE THE APPLICATION IN BLUE OR BLACK INK OR TYPE.

IF INCARCERATED GIVE YOUR COMPLETED APPLICATION TO YOUR UNIT IRO.

NEW APPLICANTS

If you have never filed a Clemency Application before, attach these certified documents to the application:

1. Judgment and Commitment Order (get from the Circuit Clerks Office if Felony Charge—or—from the District Clerk's office if misdemeanor)
2. Felony Information and/or probable cause affidavit from clerk
3. Narrative incident report from arresting agency (City Police, Sheriff, or State Police)
4. If record is sealed, include Order to Seal (get from court clerk)

REPEAT APPLICANTS

Because you have previously filed for a Clemency, all necessary paperwork is still in your file at the Parole Board. Fill out the application, have it notarized and return it to the Parole Board at the address below. **DO NOT** resubmit attachments sent before (# 1 – 4 above). Only submit NEW information to support your file.

If you have convictions **NOT** previously requested, you must furnish the following:

1. Judgment and commitment order
2. Information sheet or probable cause affidavit
3. Narrative incident report from arresting agency (City Police, Sheriff, or State Police)

**Return all applications to:
DCC Institutional Release Services (IRS)
Clemency Department
2801 S. Olive St., Suite 6-D
Pine Bluff, AR 71603**

If your address or contact information changes for any reason during the application process, please update your information by contacting 870-543-1035.

A Full Pardon Restores the Following Civil Rights:

1. Right to hold public office.
2. Right to serve on a jury.
3. Licensing privileges for certain types of employment (however, you must check with the appropriate licensing authority to determine if a full pardon is necessary to be licensed). If available, please provide written documentation from that authority advising that you will not be considered for a license without receiving a full pardon. Please provide the licensing authority, phone number and name of the person you contacted.
4. Right to serve as Executor or Administrator of an estate.

A FULL PARDON RESTORES VOTING RIGHTS. Please note, a felon's voting rights are automatically restored when one fully discharges the felony sentence, including any term of incarceration, parole, or supervision, or completed a period of probation ordered by any court.

A FULL PARDON DOES NOT NECESSARILY RESTORE THE RIGHT TO BEAR ARMS You must check the option pardon with firearm rights restored, option 1.

A FULL PARDON DOES NOT restore the right of the applicant to drive and operate a motor vehicle upon public highways.

A Request for Firearm Rights Only (Option 4): In this request you must include **ALL** your convictions. Failure to list **ALL** your convictions will result in you being denied the right to purchase a firearm, and being around a firearm, even if the Governor grants your request.

Clemency Application
Institutional Release Services—Clemency Department
2801 S. Olive St., Suite 6-D
Pine Bluff, AR. 71603
870-543-1035 / 870-879-6725 fax

Name _____ Date of Birth _____
Address _____ Race _____ Sex _____
City _____ ADC# _____ PID# _____
State _____ Zip _____ SS# _____
Phone _____ Cell _____

I am requesting the following (Check Only One Option)

- Option 1: _____ Pardon (with firearm rights restored)
Option 2: _____ Pardon (without firearm rights restored)
Option 3: _____ Commutation (**you must select at least ONE reason from options a – d**)
Reason for requesting a commutation (time cut)
a. _____ I wish to correct an injustice which may have occurred during the trial. I have attached letters or other documentation that will support this claim. (If you wish to attach explanations or statements to this application, it will be considered as a part of the application.)
You must state specifically what that injustice was:

b. _____ I have a life-threatening medical condition which does **NOT** qualify for Act 290 “Medical Release”. Or, I’m serving Life or Life without parole.) I have attached a statement explaining my condition. (You must provide a medical information release for the Board to view your medical records.)
c. _____ I want to adjust what may be considered an excessive sentence.
d. _____ My institutional adjustment has been exemplary and the ends of justice have been achieved.
Option 4: _____ Restoration of Firearm Only* -- crime must be 8 years old and no weapons involved and page 12 filled out by Sheriff in county where you currently reside and notarized.
Option 5: _____ Remission of Fines

Checklist for Applicant's Use

Please make sure all required information listed below is attached to application.

1. _____ First time applicant Yes _____ No _____
 Date of previous application _____
2. _____ Entirely completed, signed, dated and notarized application
3. _____ Judgment Orders for each conviction to be considered
4. _____ **Letters of recommendation:** (include current address and daytime phone #'s)
 IF APPLYING FOR A PARDON OR FIREARM RIGHTS ONLY, YOU MUST HAVE AT LEAST THREE LETTERS OF RECOMMENDATION.
 - i. Family
 - ii. Friends
 - iii. Minister (if applicable)
 - iv. Present or former employers
 - v. Other reputable persons in the community who may desire to testify to the moral character and good behavior of the applicant.
5. _____ Letter of Personal Plea

1. Give full name under which you were convicted and any alias names you may have used:

2. You must list below, ALL CRIMES FOR WHICH YOU WISH TO RECEIVE CLEMENCY!
 (Attach separate sheet if necessary to include all convictions to be considered)
 (Fill out completely and attach Judgment OR Commitment Orders (or docket sheets) for each crime listed)

Crime	Court Docket #	Sentence	Discharged Y/N	Sealed Y?N

3. Were there victims in your crimes? Yes ___ No ___ If so, how many ___

If yes, answer the following questions:

Did you know the victim? Yes ___ No ___

Was the victim: Person ___ Business ___ Animal ___

- a. If a person what was the relationship? _____
- b. Was the victim injured? _____
- c. Age of the victim? _____
- d. Was the victim a law enforcement or public official? Yes ___ No ___
- e. Was there more than one victim? Yes ___ No ___

4. Were other persons charged in the crimes listed above? Yes ___ No ___

If yes, list the names of your accomplices and what, if any, sentence they received.

Name	Sentence

5. List all other crimes **NOT listed in question 2**, even out of state crimes, traffic violations, misdemeanors, etc. that you **DO NOT WISH TO BE CONSIDERED A PART OF THIS APPLICATION**.

(All crimes you have been convicted of MUST be listed in question 2 if you DO want them considered for clemency or questions 5 if you DO NOT want them considered for clemency)

Crime	County of conviction	Court Docket #	Sentence

6. Have you completely discharged from your sentence? YES _____ NO _____
7. Do you have any pending criminal charges? YES _____ NO _____
8. Are you currently on probation, parole, or suspended sentence? _____
9. Was any restitution ordered in any of the convictions (**FOR PARDONS AND FIREARM RESTORATION ONLY**)? Yes _____ No _____ If yes attach receipts
10. Have all fines, fees, court costs and restitution been paid in full (**FOR PARDONS AND FIREARM RESTORATION ONLY**)? Yes _____ No _____ If yes—attach receipts. NA _____
- If you still owe restitution, cost(s) and/or fine(s) for any convictions, please list the persons or entity to which the debt is owed, and the outstanding amount still owed.
- _____
- _____

11. Do you have Federal Convictions Yes ___ No _____

If Yes, please list

Crime	County of conviction	Date	Court Docket #	Sentence

12. Were there victims in your **FEDERAL** crimes? YES _____ NO _____

13. If so, how many? _____

If yes answer the following questions;

Was there a victim in your crime (check all that apply):

Business _____ Person _____ Animal _____

- a. Did you know the victim? YES _____ NO _____
 - f. If yes, what was the relationship? _____
 - g. Was the victim injured? YES _____ NO _____
 - h. Age of the Victim _____
 - i. Was the victim law enforcement or public official? _____
 - j. Was there more than one (1) victim? YES _____ NO _____
14. Were other persons charged in the **FEDERAL** crimes listed above? Yes _____ No _____
 If yes, list the names of your accomplices and what, if any, sentences they received.

15. Concerning the facts of the crimes, briefly explain what happened in each case.
 (Attach a separate sheet if necessary)

16. Did you seek the following type of relief (**For Commutation Applicants Only**) (Date filed on the appropriate response) YES/NO:

Date: _____

- a. Expungement _____
- b. Habeas Corpus _____
- c. Appeals _____
- d. Post Conviction Relief _____

17. Explain the reason why you think the Governor should grant you the relief requested.
 (Attach a separate sheet if necessary)

18. Describe what you have done to demonstrate your rehabilitation - Community programs, volunteer work, furthering education, speaking engagements, mentoring to others, etc. (Attach a separate sheet if necessary)

19. Have you had disciplinaries while in prison? (explain) Yes _____ No _____ N/A _____

20. Are you a SEX OFFENDER? Yes _____ No _____

(If your answer is yes, answer the following questions)

>. What level _____

>. Has your registration been kept current since its requirement? _____

>. If no, explain why not _____

If you've been assessed, you must submit your most recent risk assessment with this application.

PERSONAL BACKGROUND

1. Are you:

Single _____ Married _____ Separated _____ Divorced _____ Widowed _____

Full name of spouse _____

When were you married _____

Where were you married _____

2. Previous marriages: List the following information.

Name of Spouse	Date of Marriage	Date Marriage Ended	Reason (divorce/death)
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3. Children Yes/No _____ If yes, how many? _____

For previous jobs you have held, list the following information.

Dates		Employer	Address & Current Phone
From	To		

**By signing and submitting this application, I hereby swear and affirm that the information provided is true and accurate to the best of my knowledge and I hereby waive any state or federal privacy protections or other privileges to the extent allowable by law;
I understand that Incorrect or Incomplete information provided, by me will be grounds for IMMEDIATE DENIAL!**

Applicant's Signature: _____

Person Completing the Application _____

Date of Application: _____

Subscribed and sworn to me this _____ **day of** _____ **in the year of** _____

Notary Public

My commission expires: _____

Certificate to Obtain Information
(This Page Is Required For Pardons and Restoration Of
Firearm Only applications, if the Court Clerk is unable to
locate required court documents)

This page is not required if you are applying for a commutation or if the court clerk was able to provide you with your court documents.

Ask the Clerk of the Court to fill out this form if he/she is not able to provide you with all the required documents.

I, _____ Circuit Clerk or District Clerk of _____ County
Have been approached by _____ (applicant's name) in an attempt to
obtain a certified copy of his or her commitment orders for the purpose of applying for a
Governor's Pardon. After a good faith effort, a copy of these records cannot be furnished for the
following reason:

- _____ Case too old, documents have been destroyed
- _____ A copy has been diligently searched for and cannot be found
- _____ Court House burned and record was destroyed (year _____)

Circuit Clerk/ Deputy Clerk / District Clerk

County Seal

This page is required, in addition to the application,
if **ONLY** applying for
RESTORATION OF FIREARMS ONLY (Option 4 on Page 3)

This page is **NOT** required if applying for a Pardon.

Recommendation of Chief Law Enforcement Officer in County of Residence

I, _____, hereby recommend
(applicant) _____ for the restoration of his/her right to own or
possess firearms and certify that he/she is of good standing and is deserving of this restoration of
firearm rights. In Accordance with Arkansas Code Annotated § 5-73-103, I confirm that the crime
occurred more than eight (8) years ago and no weapon was involved in the commission of the
crime. This person currently resides at _____ which is
within my jurisdiction and has lived within my jurisdiction since _____.

Sheriff _____

County of _____

Subscribed and sworn to me this _____ day of _____, _____.

Notary Public

My commission expires: