



Governor Gavin Newsom · State Capitol · Sacramento, California 95814

### APPLICATION FOR PARDON

Complete this application to request a gubernatorial (governor’s) pardon. This application is for a direct pardon; do not complete this form if you have been granted a Certificate of Rehabilitation. If you have submitted a pardon application in the last three years or if you have obtained a Certificate of Rehabilitation, please complete a re-application form. The Governor’s Office and/or the Board of Parole Hearings may contact you for additional information relating to your application. If the Governor grants you a pardon, some information from your application will appear in a public report about clemency submitted to the California Legislature each year. Learn more about the pardon application process at [www.gov.ca.gov/clemency](http://www.gov.ca.gov/clemency) or mail a request for information to: **Office of the Governor, State Capitol, Attn: Legal Affairs/Clemency, Sacramento, CA 95814.**

#### APPLICANT INFORMATION (Attach additional pages as necessary)

Name (Last/First/Middle): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

1. Conviction Summary *(Note: The Governor’s Office will review a complete copy of your criminal history report.)*

List conviction(s) for which you are requesting a pardon.			
Crime(s):	Date(s) of conviction:	County of conviction(s):	Sentence(s):

Were you under 26 years of age at the time of the crime(s) for which you are seeking a pardon?  YES  NO

List all prior conviction(s) in California, any other state or country, or in federal court:			
Crime(s):	Date(s) of conviction:	Location of conviction(s):	Sentence(s):

2. Describe the circumstances of your crime(s).

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3. Describe how a pardon may impact your life (e.g., immigration consequences, employment opportunities, impact on family members, civic participation).

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4. Describe your life since your conviction (e.g., efforts in self-development, including identifying and addressing treatment needs, professional and educational achievement; any set-backs, arrests, and new convictions; insight about past conduct; and future goals).

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5. If you have paid any money or given any gift to anyone to assist you in preparing this application, you are required by law to list their name, address, phone number, email address, the nature of your relationship, and amount paid or gift given.

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**APPLICANT DECLARATION**

Complete the following statement after you have served your Notice of Intent to Apply for Clemency.

I, \_\_\_\_\_, declare under penalty of perjury under the laws of the State of  
*(Print Applicant Full Name)*

California that the information I have provided on this application is true and correct. I further declare that I have served (mailed or delivered) my notice of intent to apply for clemency on the District Attorney of the County of \_\_\_\_\_.  
*(Name of County or Counties)*

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Submit this completed 2-page form to the **Office of the Governor, State Capitol, Attn: Legal Affairs/Clemency, Sacramento, CA 95814**. You may, but are not required to, include copies of relevant documents that support your application (e.g., certificates of achievement, photographs, letters of support, etc.). Do not send original documents, as application documents cannot be returned. Please update the Governor’s Office promptly if your contact information changes. Submit a completed Notice of Intent to Apply for Clemency to the district attorney in the county of your convictions for which you are seeking a pardon.