

Ohio Parole Board Application for Executive Clemency

1.

APPLICANT'S NAME:	ALIAS:
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2. **IF Confined:**

INSTITUTION:	INSTITUTION NUMBER:	DATE ADMITTED:
PAROLE/PRC ELIGIBILITY DATE:		EXPIRATION OF DEFINITE SENTENCE:

3. **IF NOT Confined:**

ADDRESS:	STREET	CITY	STATE	ZIP
DATE RELEASED ON PAROLE/PRC:		FINAL RELEASE DATE:		
DATE GRANTED COMMUNITY CONTROL/PROBATION:		DATE COMMUNITY CONTROL/PROBATION COMPLETED:		

OR

4.

DATE OF BIRTH:	AGE:	TELEPHONE NUMBER:
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5.

TYPE OF CLEMENCY HEARING REQUESTED: <input type="checkbox"/> Pardon <input type="checkbox"/> Commutation <input type="checkbox"/> Reprieve	ALTERNATE PHONE NUMBER:
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6. HAVE YOU APPLIED FOR CLEMENCY IN THE PAST? YES NO - If yes, when: _____

7. OFFENSES FOR WHICH CLEMENCY IS REQUESTED: (SEE INSTRUCTIONS)

COUNTY (CITY)	CASE NO.	CRIME	DATE CONVICTED	SENTENCE

8. ARREST RECORD: (JUVENILE AND ADULT)

COUNTY (CITY)	CASE NO.	CRIME	DATE CONVICTED	SENTENCE

9.

MARITAL STATUS:	SPOUSE'S NAME:	NO. OF DEPENDENTS:
EDUCATION:		

10. EMPLOYMENT HISTORY: (PAST FIVE YEARS)

EMPLOYER	ADDRESS	TELEPHONE NUMBER	EMPLOYMENT STATUS

