

Ohio Parole Board Application for Executive Clemency

1. APPLICANT'S NAME: _____ ALIAS: _____

2. **IF Confined:**

INSTITUTION:	INSTITUTION NUMBER:	DATE ADMITTED:
PAROLE/PRC ELIGIBILITY DATE:		EXPIRATION OF DEFINITE SENTENCE:
IF PREVIOUSLY INCARCERATED, LIST INSTITUTION NUMBER:		

3. **IF NOT Confined:**

OR

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

4.

DATE OF BIRTH:	AGE:	SOCIAL SECURITY NUMBER:
TELEPHONE #:	CELL PHONE #:	EMAIL:

5. TYPE OF CLEMENCY REQUESTED (SELECT ONE): Pardon Commutation Reprieve

6. HAVE YOU APPLIED FOR CLEMENCY IN THE PAST? YES NO - If yes, when: _____

7. ARREST RECORD:

COUNTY (CITY)	CASE NO.	CRIME	DATE CONVICTED	SENTENCE	REQUESTING CLEMENCY
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

8.

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

9. EMPLOYMENT HISTORY: (PAST FIVE YEARS)

EMPLOYER	ADDRESS	TELEPHONE NUMBER	EMPLOYMENT STATUS

10. COMMUNITY/VOLUNTEER SERVICE: (SEE INSTRUCTIONS)

11. NEED FOR CLEMENCY:

- EMPLOYMENT OPPORTUNITIES
- LICENSING/BOARD EXAMS/PUBLIC OFFICE
- VOLUNTEER OPPORTUNITIES
- DEPORTATION
- DISPARATE SENTENCE
- MEDICAL
- OTHER:

12. ATTACHMENTS: (LETTERS IN SUPPORT, COURT PAPERS, DIPLOMAS, ETC.) (SEE INSTRUCTIONS)

I HEREBY SWEAR THAT THE INFORMATION CONTAINED IN THIS APPLICATION AND THE ATTACHED DOCUMENTS IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE:

APPLICANT'S SIGNATURE

DATE

IF PREPARED BY ATTORNEY:

ATTORNEY'S NAME

ADDRESS

ATTORNEY'S SIGNATURE

DATE

** The application, along with the attachments will be provided to the sentencing court and/or prosecuting attorney's office in the county of conviction, if requested.*