



Intake Form

Information will be kept confidential and only used for the purposes of the Pardon Project of Erie County

Date & Time of Intake: _____ Interviewer Name _____

Client Name: _____ DOB: _____

Address: _____

Phone (H) () _____ (C) () _____

Email: _____

Why would you like to apply for a pardon? How do you think this can help you?

Are you interested in seeking a pardon, commutation, or both? Circle one.

Are your charges in Pennsylvania? Yes___ No___

Erie County? Yes___ No___

If no, which county? _____

Have you ever applied/received an expungement? Yes___ No___

If yes, what was expunged, when (year)?

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How did you learn about the Pardon Project? Check all that apply.

- Pardon committee member
- Pardon client
- County or Community Service Agency _____
- Social Media posting
- Flyer, where _____
- Other _____

For PPEC only: _____

Meets Residency Requirements Yes ___ No ___

Date Assigned _____ Date Informed Client _____

Pardon Coach Assigned _____

Comments: