

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)?

Have any of your criminal records been sealed? Yes___ No___

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

Have you completed the terms of your probation/parole? Yes___ No___

Completion date of probation/parole: _____

Do you still owe restitution/fines/costs? Yes___ No___

If yes, are you on and following a payment plan? Yes___ No___

| Charges | Date of Offense | County Where Charges Were Issued |
|---------|--------------------|--|
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Criminal Information

| How did you learn | about the I | 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: