

PARDON ADVISORY BOARD

APPLICATION

(APPLICANT INCARCERATED)

1. Applicant's Name: _____ NDSP # _____

Date of Birth: _____ Place of Birth: _____

I have used the following aliases: _____

2. I am requesting the following of the Pardon Advisory Board:

(Check one) _____ Pardon
_____ Commutation of Sentence
_____ Reprieve of Sentence
_____ Remission of Fine
_____ Other _____

3. On the _____ day of _____, 19_____, I (pled guilty/was found guilty) of (list crimes) _____

and the following sentence was imposed _____

As of this time, I will serve out my sentence on _____
(Month/Year)

4. Name and Address (City and State) of:
Trial/Sentencing Judge: _____
Prosecuting Attorney: _____
Defense Attorney: _____

5. I have been arrested, indicted/convicted of the following prior offenses (include misdemeanors and felonies):

DATE	PLACE	CRIME	DISPOSITION

OPEN RECORD NOTICE: Upon receipt at this office, your completed application will become public record.

PARDON ADVISORY BOARD APPLICATION (Continued)

6. My occupation(s) and residence(s) from five (5) years prior to my present conviction to date are as follows:

DATES		OCCUPATION - EMPLOYER AND EMPLOYER'S ADDRESS
FROM	TO	
DATES		RESIDENCE
FROM	TO	

7. What is the reason for your request?

8. Submit a detailed synopsis of your life that includes personal background and type of clemency.

NOTE: If additional pages are needed for any section, please attach and number accordingly. If you fail to complete this application in full, it will be returned to you and could result in a postponement of your hearing. This is due back to the ND Parole/ Probation Office by _____ for the _____ Pardon Advisory Board.

(Signature) (Date)