Community Case Application

Any person who has committed a crime under the laws of the State of Nevada and is no longer serving the sentence imposed may *apply* to the Pardons Board for consideration to receive a Pardon and/or the restoration of their civil rights. There is no right afforded to any person of being granted a hearing or to receive any favorable action by the Pardons Board. The Pardons Board in Nevada consists of the Governor, the Attorney General and the Justices of the Supreme Court.

Offenders who have completed their sentence may apply for a pardon through the Executive Secretary of the Pardons Board. Applications by parolees who desire a commutation of sentence will be rejected. NRS 176.033 provides the avenue for parolees to request an early termination from parole. The power to grant a pardon or restore the rights of an offender does not extend to crimes committed under federal law or the laws of any other state.

An application for a pardon will generally not be considered unless a significant period of time has passed since the applicant's final discharge under the sentence. During this period, the applicant is expected to demonstrate complete and total rehabilitation.

Legal effects of a Pardon in Nevada

One of the primary misconceptions about pardons in Nevada is that a pardon is the only manner by which one may have one's rights restored. In some states a pardon is the only manner by which a convicted felon may have his or her civil rights restored. However, in Nevada, some rights are restored upon the completion of a sentence or period of parole or probation (see NRS 176A.850, 213.155 & 213.157).

Another misconception is that a pardon erases the conviction from the record. A pardon <u>does not</u> eliminate or erase the conviction. The records of conviction continue to exist in both court and law enforcement files.

The Right to Own and Possess Firearms

Convicted felons are prohibited from having firearms pursuant to NRS 202.360. The Pardons Board is the only body that can restore this right.

Effect of a Pardon on Occupational Licenses

With regard to occupational licensing, where a statute limits rights based on the underlying conduct and not the pardoned offense itself, a pardon would not remove or erase the disability of past conduct. If there is a requirement that the license applicant has not been convicted of a felony, the pardon would permit licensing. However, if the licensing standard is good moral character, the pardon does not erase the moral guilt associated with the commission of a criminal offense and the fact giving rise to that conviction may be considered in determining whether that person is of "good moral character."

Community Case Application February 2004 Page 2

What a Pardon does:

- An unconditional pardon removes all disabilities resulting from conviction thereof.
- A Pardon forgives but does not forget.
- A Pardon is the only instrument available to restore one's right to bear arms in Nevada.

A Pardon Does <u>NOT</u>:

- A Pardon does not overturn a judgment of conviction.
- A Pardon does not erase or obliterate the fact that one was once convicted of a crime.
- A Pardon does not substitute a good reputation for one that is bad.
- A Pardon does not relieve a convicted sex offender of the requirement to register as such.
- A Pardon does not attest to rehabilitation of a person.
- A Pardon does not remove any disabilities resulting from separate convictions that are not specified on the instrument of Pardon (ie, being pardoned on one offense but not another would not remove disabilities from the offense not pardoned).
- The Nevada Pardons Board does not have the authority to restore any rights lost as a result of a conviction in a jurisdiction outside of Nevada.

Attached to this letter is a Pardons Board application. Please fill out the application and three waivers (all of which need to be notarized) and return it to:

Board of Pardons Commissioners 1445 Old Hot Springs Rd #108B Carson City, NV 89711

Please note that the Pardons Board receives hundreds of applications for pardons and only a limited number of those applications will be accepted for review and consideration by the Pardons Board. If your application is accepted for review, a complete background investigation will be conducted and a report will be issued to the Pardons Board detailing all of your criminal history, financial responsibility, character and any other information deemed relevant.

In the event the investigation reveals negative information that was not disclosed on your application, further consideration may be rejected. If you currently reside out of state, the applicable Parole or Probation department may conduct the investigation.

If you have any questions, please feel free to contact us at (775) 687-8278.

STATE OF NEVADA BOARD OF PARDONS CARSON CITY, NEVADA Application for Pardon

SECTION 1

Applicant Name:							
Home Tel.	Work Tel.	Cell #.					
Name of applicant as convicted:							
Date of birth:		Social Security #:					
US Citizen?: Yes / No		Sex: Male / Female					
Married or Single:		Telephone number: ()					
Annual salary: \$	Employment (circle one): Full time / Part time / Une	employed / Retired / Disability / Other					
Have you ever declared discharged:	d bankruptcy? If so, please	provide the name of the court and the year it was					
Present Address:							
Length of time at this a	address:						
Present employment:							
Type of action							
If you are requesting the right to bear arms, please provide an explanation why it may be necessary:							
Have any extraordinary	y circumstances occurred th	nat would merit the consideration and granting of a Pardon?					

SECTION 2

Convictions: List each case that you wish to have action on. Attach a separate sheet if necessary.

Conviction:						
Judicial District Court:	County:					
Amount of Fine, Forfeiture or Restitution:	Have all Fines and Restitution been paid? Yes/No If so, year of completion					
Name of Sentencing Judge:						
Sentence Date:						
Term of Sentence: (includes prison or probation terms)	Date of discharge from: Parole Probation Prison					

Have you ever applied for, or been granted any type of clemency?: _____ If YES, what type and date granted?_____

List any arrests since your last conviction. Have you been arrested, charged or convicted of any new offenses against the penal laws of any State or the United States of America (federal cases) since your conviction on the offense for which you now make application? Are there any legal proceedings now pending against you? Please give as much information as you can on arrests, etc. This includes felony, gross misdemeanors and misdemeanors:

Do you have now, or will there be in the future, any plans to appeal your conviction through the courts? Yes or No______

I hereby state that the information I have provided in this application is true and correct:

App	licant'	s sig	gnature:	
- r r r		~ ~ ~	B110000010-	_

_____Date:_____

Applicant's printed name:_____

Waiver and Liability Release

Name:	Soc. Sec#:	DOB:
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(print or type)

This is to certify that I have applied for a pardon and the restoration of my civil rights and acknowledge that an investigation will be conducted prior to my case appearing before the Nevada Board of Pardons Commissioners (Pardons Board). In consideration for the processing of my application, I, ______, do hereby agree to the following:

WAIVER OF LIABILITY AND INFORMATION TO BE RELEASED:

Having made application to the Pardons Board and desiring it to be informed as to my record and character, I authorize and desire the release of any information, verbal and/or written, which includes but is not limited to information related to current or previous employment, personnel records, criminal records, educational records, any investigative records, credit records, tax or bank records, correctional records, sealed records, confidential records or information previously agreed to be withheld, medical records, mental health records, opinions of my character or conduct, and any and all information that a person or entity may have concerning me, and I agree to hold all entities and persons whomsoever from any liability because of furnishing said information.

INFORMATION TO BE RELEASED FROM:

Any person or entity who may have knowledge of the above named individual including but not limited to friends, family members, neighbors, acquaintances, co-workers, businesses, previous or current employers, any law enforcement or corrections agency, any mental health or medical organization, clinic, physician, laboratory, pharmacy, hospital, inpatient or outpatient program or facility, any credit reporting bureau, any educational facility or institution, any financial institution, or any other person or entity deemed relevant by the agency or person conducting the background investigation incident to my application for pardon and restoration of civil rights, may furnish said information.

INFORMATION TO BE RELEASED TO:

The Nevada Department of Public Safety, the Nevada Division of Investigations, the Nevada Division of Parole and Probation, the Pardons Board, the Nevada Department of Corrections, the Nevada Criminal History Repository, the Nevada Board of Parole Commissioners, the office of the Nevada Attorney General, the Nevada Supreme Court, the office of the Governor of the State of Nevada or any other person, department or agency inside or outside the State of Nevada involved with gathering information during the conduct of the investigation incident to my application for pardon and restoration of civil rights, may receive said information.

PURPOSE OF RELEASE:

I, the above named applicant, have requested a pardon and restoration of civil rights from the Pardons Board. The members of the Pardons Board may consider a wide range of factors including my character, conduct, criminal record, mental or medical health status and any other significant history about me incident to such application for clemency.

I understand that my authorization under this Waiver and Liability Release is voluntary and that I may refuse to sign this document. I understand that I am not entitled to receive or examine, review or otherwise discover the contents of the information gathered or disclosed in the course of the investigation incident to my application for pardon and restoration of civil rights. I understand that if I refuse to sign this authorization document, my application for pardon and restoration of civil rights. I understand that information gathered may become public record if the subject application is brought for consideration at a meeting before the Pardons Board. I understand that I may revoke this authorization under this Waiver and Liability Release at any time by notifying the Pardons Board in writing at 1445 Hot Springs Rd., Suite 108B, Carson City, NV 89711, except to the extent that action has taken place in reliance on this authorization document. I understand that any such revocation of authorization will result in the termination of any pardons investigation or termination of further consideration for clemency. This waiver shall apply to any right of action of any nature whatsoever, that may accrue to myself, my heirs, or my personal representative(s).

	Dated this o	day of, 20
	Signature of person w	aiving rights
_day of _		, 20
		(Notary Seal)
		Signature of person w

Waiver and Liability Release

Name:

(print or type)

Soc. Sec#:_

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INFORMATION TO BE RELEASED FROM:

Any person or entity who may have knowledge of the above named individual including but not limited to friends, family members, neighbors, acquaintances, co-workers, businesses, previous or current employers, any law enforcement or corrections agency, any mental health or medical organization, clinic, physician, laboratory, pharmacy, hospital, inpatient or outpatient program or facility, any credit reporting bureau, any educational facility or institution, any financial institution, or any other person or entity deemed relevant by the agency or person conducting the background investigation incident to my application for pardon and restoration of civil rights, may furnish said information.

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		Dated this	day of	, 20
		Signature of pe	rson waiving rights	 I
Subscribed and Sworn before me this	day of _		, 20	·
by				
Signature of Notary				
Notary Public in and for said County of				
State of			(Nat	arry Casel)
	***			ary Seal)

Waiver and Liability Release

Name:

(print or type)

Soc. Sec#:_____

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Dated this _____ day of _____, 20____

Signatura	fnoncon	waining	mighta
Signature o	n person	warving	rights

Subscribed and Sworn before me this _____ day of _____, 20____

by _____

Signature of Notary

Notary	Public	in	and	for	said	County	of	
rotary	I uone		anu	101	saiu	County	oı	

State of _____

(Notary Seal)