

## Application for Consideration of your Case (Wrongful Convictions)



### Eligibility (Wrongful Conviction Cases)

The International Innocence Initiative reviews cases of innocence for people who have gone to trial and were found wrongfully guilty of crimes. We consider post-conviction cases across the nation and internationally for individuals wrongfully convicted of different types of crimes and with different sentence lengths, including cases where a defendant has served their complete sentence or pleaded guilty. We provide either free or low-cost legal assistance to innocent persons wrongfully convicted (if they meet eligibility for such assistance). Additionally, in order to apply for representation, a case must meet the following criteria:

- **Innocence Claim:** The defendant must be innocent of the crime(s) for which convicted.
- **Case Status:** The defendant's trial must be completed and have resulted in a conviction.
- **Location:** Precedence is given to cases where the person was convicted in a jurisdiction other than where domiciled. Precedence is also given to US Citizens who were convicted in a foreign country. However, we can consider convictions taking place anywhere (albeit, limitations on the provision of legal services are dependent on the availability of counsel authorized to represent persons in a particular jurisdiction).
- **New or Strong Evidence Currently Exists or is Discoverable Demonstrating Innocence:** Precedence is given to cases involving evidence that was not able to be presented at Trial.
- **(For No-Cost Representation):** The defendant must be indigent (unable to afford legal representation)

### Questions & Contact During the Application Process

Due to the high number of requests that we get from people all over the world, we are unable to respond to correspondence regarding the application process. We review cases based on the order that we receive applications. We will endeavor to reach a decision as to your application as soon as practicable and we will inform you (or an authorized Contact) of our decision by way of written correspondence. If we have questions about your case or application, we will contact you directly via legal mail. It is our goal to help find representation for as many innocent victims of wrongful convictions as we can.

### Address Changes & Additional Information

If you have additional information that is new or not included in your application, or if your address changes, please provide any relevant changes to our office by writing to:

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International Innocence Initiative, 161 N. Clark Street, Suite 1700, Chicago, IL 60601  
ATTN: Wrongful Convictions  
(Or by Email: [Mail@innocenceinitiative.org](mailto:Mail@innocenceinitiative.org))

We will include any new information in your file to be reviewed along with your application. We will not accept **ANY** legal documents unless specifically requested.

### Disclaimer

Please note that contacting the International Innocence Initiative and submitting an application does not constitute legal representation by our organization. The International Innocence Initiative does not agree to represent any applicants until an attorney has contacted the applicant and both the attorney and the applicant have signed a formal retainer agreement.

During the review process, you may need to pursue remedies on your own in order to meet filing deadlines. Unfortunately, we cannot provide legal advice or assistance until we agree to represent you in a post-conviction filing. You must proceed on your own. Thank you for your patience.

### Instructions

Please enter your information to the best of your ability in the space provided. Write clearly and include **all** relevant facts of your case. You may attach additional sheets if you run out of space. In addition to the application, we encourage you to write and attach a narrative with your story of your wrongful conviction in your own words.

**We will not accept or review any other legal documents (unless we request something specifically).**

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**I.**  
**PERSONAL INFORMATION**

Name (first, middle, last): \_\_\_\_\_

Alias (other names, monikers): \_\_\_\_\_

Booking#: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Current Prison/Jail/Brig: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Current Cell Location: \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Primary Language: \_\_\_\_\_

Highest Level of Education: \_\_\_\_\_

Military Service (if any): \_\_\_\_\_

Disabilities (if any): \_\_\_\_\_

Citizenship (All Countries): \_\_\_\_\_

Where were you arrested?: \_\_\_\_\_

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**II.**  
**ATTORNEY INFORMATION**

Trial Attorney: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Case Number: \_\_\_\_\_

Appellate Attorney (if any): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Case Number(s): \_\_\_\_\_

Date Decided: \_\_\_\_\_

Current/Other Attorney (if any): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Describe the proceeding(s) and provide any case number(s), and date(s) decided in which you were/are currently represented:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**III.  
FAMILY MEMBER/FRIEND  
INFORMATION**

Please provide the names and contact information of any family member(s) or friend(s) who may have helpful information or documents in your case:

Name: \_\_\_\_\_

Relation: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

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Name: \_\_\_\_\_

Relation: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

If a family member or friend is filling out this application, please provide your contact information. *Please note that the applicant or legal guardian for the applicant must personally sign the authorization form.*

Name: \_\_\_\_\_

Relation: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

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**IV.  
BASIC CASE INFORMATION**

Age at the Time of Crime(s): \_\_\_\_\_

Date of Crime(s): \_\_\_\_\_

Location of Crime(s): \_\_\_\_\_  
\_\_\_\_\_

Date of Arrest: \_\_\_\_\_

Location of Arrest: \_\_\_\_\_  
\_\_\_\_\_

Booking Number: \_\_\_\_\_

Trial Judge Name: \_\_\_\_\_

Type of Trial:                      Jury                      Bench                      Plea Deal (no trial)

Multiple Trials:                      Yes                      No

Prosecutor's Name: \_\_\_\_\_

Briefly describe what the prosecutor claimed you did: (What kind of evidence played a role in the investigation and trial? Include any physical evidence, whether it was tested, and what those test results were.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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## Application for Consideration of your Case (Wrongful Convictions)

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What wrongful conviction are you applying for us to consider?  
*i.e. "Murder in the first degree"*

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What is the case number of your conviction?

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What is the date of your conviction?

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Where did this conviction occur?

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What sentence did you receive for your wrongful conviction?

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Please list any co-defendants charged in this case:

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Please list the name(s) of any victim(s):

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Were you present when the crime occurred?

YES

NO

Were any of your co-defendants present when the crime occurred?

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What were you doing at the time of the crime? *Please be as specific as you can (i.e. if you were home, please provide your home address).*

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Did any witnesses identify you? How? *i.e. Line-up, Photo line-up, Show Up*

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Describe any interviews you had with the police? *How long did they last? Who was involved?*

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Did you speak to an attorney at the time of your arrest?

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Were there any other suspects that were not arrested or charged?      Yes      No

Describe the case against you at trial. What evidence was presented of your guilt? *Include any witness testimony and your relationship with that witness.*

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What evidence was presented of your innocence?  
*Include any witness testimony and your relationship with that witness.*

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Do you know of any witnesses who were available at the time of trial but were not called to testify? Why they were not called?

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Did you testify at trial? If so, what did you say?

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If not, why didn't you testify?

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If you had an alibi, did your alibi witness(es) testify at your trial? Yes No

If no, please explain why they did not testify, if you know:

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Also, if no, please also provide their names and contact information:

Name:

Relation:

Address:

Phone:

Are there any items of physical evidence that you believe were not found or tested that could help prove your innocence? Please describe.

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Please list any post-conviction filings in your case, including the:

- type of filing,
- any new case numbers,
- the date of filing,
- the nature of the claims,
- the date and nature of any decisions made, and
- the attorney who represented you.

*i.e. Direct Appeal, Petition for Clemency, Post-conviction Petition, etc.*

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Have you applied to another innocence organization?

Yes

No

If yes, which innocence organization(s) have you applied to and what is the status of your case at those organizations?

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Please list any case-related documents you or your supporters have access to. Please include contact information for anyone listed who we can reach out to in the event that we would like to review any documents.

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If you have a loved one or supporter who you would like to authorize us to speak to about the status of the review of your case, please list their contact information here. We will let them know when a decision has been mailed to you.

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Name of Person Submitting Form:

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Relationship to the Defendant:

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Preferred Method of Contact:

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# Application for Consideration of your Case (Wrongful Convictions)

## AUTHORIZATION

### **A. Communication in General**

This document, or a photocopy thereof, expressly authorizes the International Innocence Initiative, a not-for-profit organization, which includes any attorney, law student, intern, investigator, expert, staff member or anyone else working for or with the International Innocence Initiative to communicate with anyone who has information about me or my case. This includes all of my previous and current attorney(s), any correctional institution where I am housed or used to be housed, any probation and parole offices, law enforcement or governmental agencies, prosecutors, prosecutor conviction integrity or review units, courts, and court staff, witnesses, other innocence organizations, the media, and any other person, entity, or organization that the International Innocence Initiative believes is pertinent to the review, investigation, or evaluation of my case or is in the interests of the wrongly convicted.

### **B. Release and Copy of Documents or Other Materials**

This document, or a photocopy thereof, expressly authorizes and directs anyone or any agency in possession of materials pertaining to me or my case to release them to the International Innocence Initiative for examination and copying. This includes, but is not limited to any documents, photographs, audio, video, and digital files relating to me or my case.

### **C. Communication with Prior Attorneys**

This document, or a photocopy thereof, expressly authorizes and directs my previous and/or current attorney(s) to release all of my files and discuss my privileged communications with the International Innocence Initiative.

### **D. Waiver of Confidentiality**

I fully understand that there may be statutes, rules, and regulations that protect the confidentiality of some of the information covered by this authorization; it is my specific intent to waive the protection of the attorney-client privilege and all such statutes, rules, and regulations to the extent necessary to share the above information with the International Innocence Initiative.

### **E. Representation**

I understand that the International Innocence Initiative is not agreeing to represent me in any current or future legal proceedings at this time.

### **F. Expiration of Authorization**

I understand that the review and evaluation of my case may take months to years. This Authorization remains in effect from the date below until expressly revoked by me in writing. By my signature below, I represent that this waiver is voluntary and given without any reservation.

DATED: \_\_\_\_\_

\_\_\_\_\_ (signature)

\_\_\_\_\_ (printed name)