

IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA  
IN AND FOR THE COUNTY OF \_\_\_\_\_

Applicant's County of Residence

In the Matter of the Application of

\_\_\_\_\_  
Type Applicant's Full Name - First Middle Last and Suffix, if applicable

Date of Birth \_\_\_\_\_  
Month Day, Year

CII Number \_\_\_\_\_

Criminal Case Number(s) \_\_\_\_\_  
List applicable Criminal Case Number(s)

Court use only

**PETITION FOR CERTIFICATE OF REHABILITATION AND PARDON**  
Pursuant to Penal Code Sections 4852.01 and 4852.06

The above-named applicant hereby respectfully represents and shows that:

**FELONY HISTORY**

[ All felony convictions must be listed. If you have suffered more than three (3) felony convictions, attach additional sheets following the same format. ]

**Most Recent Felony Conviction**

On or about \_\_\_\_\_, I was convicted of the crime of \_\_\_\_\_,  
Month Day, Year Indicate crime and Penal Code Section

in the county of \_\_\_\_\_, California. My sentence for this offense was:

[ Check appropriate box ]

Commitment to state prison or other state institution at \_\_\_\_\_;  
Name of institution or city where located

Probation with suspended sentence to state prison or other state institution;

Probation, after the sentencing proceedings were suspended.

Thereafter, on or about \_\_\_\_\_, I was;  
Date released from custody

[ Check appropriate box ]

Discharged from state prison or other state institution after completing my sentence;

Released on parole, from which I was finally discharged \_\_\_\_\_;  
on Discharge date

Released from custody on probation after serving a jail sentence;

As a condition of my probation, I was released from custody after serving time in jail, and successfully completed my probation on \_\_\_\_\_, and obtained relief under Penal Code section 1203.4 on \_\_\_\_\_,  
Date probation ended Date 1203.4 granted by the Court

### Second Most Recent Felony Conviction

On or about \_\_\_\_\_, I was convicted of the crime of \_\_\_\_\_,  
Month Day, Year Indicate crime and Penal Code Section

in the county of \_\_\_\_\_, California. My sentence for this offense was:

[ Check appropriate box ]

- Commitment to state prison or other state institution at \_\_\_\_\_;  
Name of institution or city where located
- Probation with suspended sentence to state prison or other state institution;
- Probation, after the sentencing proceedings were suspended.

Thereafter, on or about \_\_\_\_\_, I was;  
Date released from custody

[ Check appropriate box ]

- Discharged from state prison or other state institution after completing my sentence;
- Released on parole, from which I was finally discharged  
on \_\_\_\_\_;  
Discharge date
- Released from custody on probation after serving a jail sentence;
- As a condition of my probation, I was released from custody after serving time in jail, and successfully completed my probation on \_\_\_\_\_, and obtained relief under Penal Code section 1203.4 on \_\_\_\_\_;  
Date probation ended Date 1203.4 granted by the Court

### Third Most Recent Felony Conviction

On or about \_\_\_\_\_, I was convicted of the crime of \_\_\_\_\_,  
Month Day, Year Indicate crime and Penal Code Section

in the county of \_\_\_\_\_, California. My sentence for this offense was:

[ Check appropriate box ]

- Commitment to state prison or other state institution at \_\_\_\_\_;  
Name of institution or city where located
- Probation with suspended sentence to state prison or other state institution;
- Probation, after the sentencing proceedings were suspended.

Thereafter, on or about \_\_\_\_\_, I was;  
Date released from custody

[ Check appropriate box ]

- Discharged from state prison or other state institution after completing my sentence;
- Released on parole, from which I was finally discharged  
on \_\_\_\_\_;  
Discharge date
- Released from custody on probation after serving a jail sentence;
- As a condition of my probation, I was released from custody after serving time in jail, and successfully completed my probation on \_\_\_\_\_, and obtained relief under Penal Code section 1203.4 on \_\_\_\_\_;  
Date probation ended Date 1203.4 granted by the Court



## FORM 1 INSTRUCTIONS

1. After completing the *Petition for Certificate of Rehabilitation and Pardon*, file it with the County Clerk's office in the county in which you reside. In every case, you must have resided continuously for **five (5) years** in this state prior to filing the petition.
2. The period of rehabilitation begins to run upon your discharge from custody or upon release on parole or probation, whichever is sooner. The period of rehabilitation shall constitute **five (5) years** residence in this state, **plus** a period of time determined by the following rules:
  - To the **five (5) years** there shall be added **four (4) years** in the case of any person convicted of violating Section 187, 209, 219, 4500, or 12310 of the penal code, or subdivision (a) of Section 1672 of the Military and Veterans Code, or any other offense which carries a life sentence.
  - To the **five (5) years** there shall be added **two (2) years** in the case of any person convicted of committing any offense not listed above and which does not carry a life sentence. (The majority of applicants require a **seven-year** rehabilitation period).
  - To the **five (5) years** the trial court hearing the application for the Certificate of Rehabilitation may add additional years when a person has served consecutive sentences. The amount of additional time will not exceed the sum of the maximum penalties for all the crimes.
  - Any person discharged after completion of his/her term or released on parole before May 13, 1943, is not subject to the periods of rehabilitation set forth in these rules.
3. If you were released on felony probation and successfully completed probation, you must obtain relief under Penal Code Section 1203.4 before applying for a Certificate of Rehabilitation.
4. You are entitled to be represented by an attorney of your own selection, or by the public defender. You are entitled to receive assistance from all rehabilitative agencies including officers from adult probation and parole, and for persons under the age of 30 years, from the Youth Authority.
5. It is unlawful for anyone, other than an attorney, to accept any fee, money or anything of value for their services in representing you in this proceeding.
6. You are not required to pay filing fees of any kind in connection with this proceeding.
7. When the Court sets a hearing date on your Petition, you are required to give notice of that date at least thirty (30) days before the hearing. You must formally notify the District Attorney for each county in which you have been convicted, and the Governor's Office.
8. A Certificate of Rehabilitation is not an automatic pardon; it is only an automatic application for a pardon.

IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA  
IN AND FOR THE COUNTY OF \_\_\_\_\_

Applicant's County of Residence

In the Matter of the Application of

\_\_\_\_\_  
Type Applicant's Full Name - First Middle Last and Suffix, if applicable

Date of Birth \_\_\_\_\_  
Month Day, Year

CII Number \_\_\_\_\_

Criminal Case Number(s) \_\_\_\_\_  
List applicable Criminal Case Number(s)

Court use only

**NOTICE OF FILING OF PETITION FOR CERTIFICATE OF REHABILITATION AND PARDON**  
Pursuant to Penal Code Sections 4852.01 and 4852.06

To the Governor of the State of California:

District Attorney, County of \_\_\_\_\_ ;  
County of Residence

District Attorney, County of \_\_\_\_\_ ;  
Most recent felony in county of conviction, if different from County of Residence

District Attorney, County of \_\_\_\_\_ ;  
2<sup>nd</sup> most recent felony in county of conviction, if applicable

District Attorney, County of \_\_\_\_\_ ;  
3<sup>rd</sup> most recent felony in county of conviction, if applicable

You and Each of You Will Please Take Notice That On the \_\_\_\_\_ day  
of \_\_\_\_\_ ;  
Date you filed your Petition for Certificate of Rehabilitation and Pardon

the undersigned has filed a petition in the above-mentioned court(s) for a Certificate of Rehabilitation  
and

Pardon in accordance with the provision of Chapter 3.5, Title 6, Part 3 of the Penal Code of the State of

California, and that said petition has, by said court, been set for a hearing on \_\_\_\_\_ day of  
the \_\_\_\_\_  
Day of hearing

to commence at \_\_\_\_\_  a.m.  p.m., of said day, or as  
soon  
Month, Year Time of hearing

as the matter can be heard, in its courtroom, department \_\_\_\_\_ at the courthouse  
Department

in the city \_\_\_\_\_, county \_\_\_\_\_ state of California.  
of \_\_\_\_\_ of \_\_\_\_\_  
City where hearing will be held County where hearing will be held

\_\_\_\_\_  
Applicant's Signature Month Day, Year

\_\_\_\_\_  
Applicant's Street Address

\_\_\_\_\_  
Applicant's City, State ZIP Code

**AFFIDAVIT OF SERVICE BY MAIL**

**STATE OF CALIFORNIA**

City of \_\_\_\_\_, County of \_\_\_\_\_

I, \_\_\_\_\_ being first duly sworn, deposes, and says:  
Full Name - First Middle Last and Suffix, if applicable

I am a citizen of the United States, am over the age of 18 years, and am not a party to the above-entitled

proceeding. I am a resident of the County \_\_\_\_\_, State of  
of \_\_\_\_\_ California.  
County of Residence

My  residence  business address is \_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State ZIP Code

On the \_\_\_\_\_ day of \_\_\_\_\_, I served the attached Notice to each person listed below  
Day of the Month Month, Year

\_\_\_\_\_  
Full Name - First Middle Last and Suffix, if applicable Street Address County

\_\_\_\_\_  
Full Name - First Middle Last and Suffix, if applicable Street Address County

\_\_\_\_\_  
Full Name - First Middle Last and Suffix, if applicable Street Address County

\_\_\_\_\_  
Full Name - First Middle Last and Suffix, if applicable Street Address County

by placing a copy of this Notice in a sealed envelope and mailing it first class, postage pre-paid to each person as listed above. There is a delivery service by United States mail at each of the places so addressed, or there is a regular communication by mail between the place of mailing and each of the places so addressed.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_  
Day of the Month Month, Year

\_\_\_\_\_  
Full Name of Notary Public - TYPED or PRINTED Notary Public - SIGNATURE

In and for the City of \_\_\_\_\_, County of \_\_\_\_\_, California.

**NOTICE OF SERVICE IN PERSON**

Receipt of copy of this Notice is hereby admitted this \_\_\_\_\_ day of \_\_\_\_\_ .  
Day of the month Month, Year

**Governor's Office  
State Capitol  
Legal Affairs Division**

\_\_\_\_\_  
Full Name of Governor's staff - TYPED or PRINTED

\_\_\_\_\_  
Governor's staff - SIGNATURE

\_\_\_\_\_  
Governor's staff - TITLE

\_\_\_\_\_  
Month Day, Year

Receipt of copy of this Notice is hereby admitted this \_\_\_\_\_ day of \_\_\_\_\_ .  
Day of the month Month, Year

\_\_\_\_\_  
Full Name of District Attorney staff - TYPED or PRINTED

\_\_\_\_\_  
District Attorney staff - SIGNATURE

\_\_\_\_\_  
County District Attorney

\_\_\_\_\_  
Month Day, Year

Receipt of copy of this Notice is hereby admitted this \_\_\_\_\_ day of \_\_\_\_\_ .  
Day of the month Month, Year

\_\_\_\_\_  
Full Name of District Attorney staff - TYPED or PRINTED

\_\_\_\_\_  
District Attorney staff - SIGNATURE

\_\_\_\_\_  
County District Attorney

\_\_\_\_\_  
Month Day, Year

Receipt of copy of this Notice is hereby admitted this \_\_\_\_\_ day of \_\_\_\_\_ .  
Day of the month Month, Year

\_\_\_\_\_  
Full Name of District Attorney staff - TYPED or PRINTED

\_\_\_\_\_  
District Attorney staff - SIGNATURE

\_\_\_\_\_  
County District Attorney

\_\_\_\_\_  
Month Day, Year

Receipt of copy of this Notice is hereby admitted this \_\_\_\_\_ day of \_\_\_\_\_ .  
Day of the month Month, Year

\_\_\_\_\_  
Full Name of District Attorney staff - TYPED or PRINTED

\_\_\_\_\_  
District Attorney staff - SIGNATURE

\_\_\_\_\_  
County District Attorney

\_\_\_\_\_  
Month Day, Year

## FORM 2 INSTRUCTIONS

1. After completing this **Notice of Filing for Certificate of Rehabilitation and Pardon**, make enough copies to distribute one (1) copy to:
  - the Governor of California;
  - the District Attorney in your county of residence where you filed your **Petition for Certificate of Rehabilitation and Pardon**, and;
  - each District Attorney of the county in which you were convicted of a felony.
  
2. This **Notice of Filing for Certificate of Rehabilitation and Pardon** must be served to all of the aforementioned individuals **at least thirty (30) days prior** to the date set for your hearing. You may do so by utilizing one or both of the following forms, in any combination necessary, as long as all of the aforementioned individuals have been served.
  - **Affidavit of Service by Mail (Form 2A)** - If you intend to have a Notary Public mail a copy of the **Notice of Filing for Certificate of Rehabilitation and Pardon** to each of the aforementioned individuals, you may do so by having the Notary Public complete and sign the **Affidavit of Service by Mail**. Mailing procedures are outlined in the Affidavit.
  - **Notice of Service in Person (Form 2B)** - If you intend to hand-deliver a copy to each of the aforementioned individuals, you may do so by utilizing this form and having each individual sign in the appropriate space indicating that a copy of the **Notice of Filing for Certificate of Rehabilitation and Pardon** was received.
  
3. After you have served all the aforementioned individuals, personally or by mail, file this completed **Notice of Filing for Certificate of Rehabilitation and Pardon** and the **Affidavit of Service by Mail** or **Notice of Service in Person**, or both, as the case may be, with the County Clerk's office in the county in which you reside.



IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA

IN AND FOR THE COUNTY OF \_\_\_\_\_

Applicant's County of Residence

In the Matter of the Application of

\_\_\_\_\_  
Type Applicant's Full Name - First Middle Last and Suffix, if applicable

Certificate Number \_\_\_\_\_

Date of Birth \_\_\_\_\_  
Month Day, Year

CII Number \_\_\_\_\_

Criminal Case Number(s) \_\_\_\_\_  
List applicable Criminal Case Number(s)

Court use only

CERTIFICATE OF REHABILITATION

Pursuant to Penal Code Section 4852.13

The petition of \_\_\_\_\_, presently residing  
at \_\_\_\_\_,  
Type Applicant's Full Name - First Middle Last and Suffix, if applicable  
Type Applicant's Street Address, City, State, and ZIP Code

heretofore filed, praying for a Certificate of Rehabilitation pursuant to the provisions of Chapter 3.5, Title 6 of Part 3 of the Penal Code of the State of California, came on regularly for hearing on this \_\_\_\_\_ day  
Day of the Month  
of \_\_\_\_\_ and proof having been made to the  
Month, Year

satisfaction of the Court that notice of the time of hearing has been regularly given as required by law; and from satisfactory proof taken at said hearing the Court finds that all allegations of said petition are true, and that the required period of rehabilitation has elapsed since petitioner's date of discharge from custody due to completion of the term to which the petitioner was sentenced, or upon the release on parole or probation on \_\_\_\_\_, that, where appropriate, petitioner has  
Month Day, Year  
obtained relief pursuant to Penal Code Section 1203.4, and that petitioner has demonstrated by the course of conduct his/her rehabilitation and fitness to exercise all the civil and political rights of citizenship (except as provided in Penal Code Section 4852.15); and that petitioner has been \_\_\_\_\_  
Total Number of Felony Convictions

time(s) convicted of a felony;

WHEREFORE, It Is Ordered, Adjudged, and Decreed, And this court does hereby order, adjudge, and decree the petitioner has been rehabilitated and is fit to exercise all the civil and political rights of citizenship (except as provided in Penal Code Section 4852.15), and by virtue thereof, this court recommends that the Governor of the State of California grant a full pardon to said petitioner.

Done in open court this \_\_\_\_\_ day of \_\_\_\_\_  
Day of the Month Month, Year

\_\_\_\_\_  
Judge of said Superior Court - TYPED or PRINTED

\_\_\_\_\_  
Judge of said Superior Court - SIGNATURE