



State of New Jersey

OFFICE OF THE ATTORNEY GENERAL

DEPARTMENT OF LAW AND PUBLIC SAFETY

OFFICE OF PUBLIC INTEGRITY AND ACCOUNTABILITY

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Governor

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REQUEST FOR REVIEW BY CONVICTION REVIEW UNIT

The Conviction Review Unit (CRU) reviews claims of actual innocence by persons convicted of felonies in New Jersey state courts to determine whether there is clear and convincing evidence of actual innocence. You may apply for a review regardless of whether you were convicted at trial or pled guilty.

Eligibility requirements:

1. You must have been convicted in the New Jersey Superior Court, Criminal Division of indictable conviction(s), also known as felony offenses.
2. Individuals who are in **custody**, serving time on the sentence for which they were wrongfully convicted will have **priority** over individuals who have been released from custody.
3. The application for review must be based on objectively credible and verifiable evidence of innocence, which means reliable evidence of innocence which can be confirmed by independent investigation.
4. Your application will not be reviewed if your case is on direct appeal. If you have a post-conviction petition pending in any court, your request for a review may be put on hold until that petition is decided.

1. Name: _____

2. Date of Birth: _____

3. Social Security Number: _____

4. SBI number: _____

5. Current Address:
(if incarcerated, Correctional Institution Address)

6. Are you currently serving a sentence? YES ____ NO ____

7. If yes, how long is your sentence? _____

8. Description of the offense(s) of conviction:

9. County of Conviction: _____

10. Case Number (Indictment or Accusation Number): _____

11. If applicable, federal habeas docket number: _____

12. Are you **currently** represented by an attorney? YES ____ NO ____

If so, attorney's name and phone number: _____

13. Do you currently have an appeal or post-conviction petition pending in any court?

YES ____ NO ____

If an appeal, Appeal Number: _____

17. Where did you live at time of offense? _____

18. Did you know the victim(s)? If yes, how?

19. Were you present at scene of offense? If so, where were you, what were you doing, and why?

20. Were you involved in any way with offense? If yes, how?

21. Did your case involve: DNA evidence, fingerprints, ballistic evidence, hair evidence, confession, witness ID, etc.? If yes, explain how:

21. Do you know who committed the crime? If so, how do you know this?

22. To fully understand the reasons you say that you are innocent, we may want to review some of the important documents from your case. PLEASE DO NOT SEND THESE DOCUMENTS NOW. If we need a document, you will be contacted and told which documents to send.

Check off the materials which you have in your possession:

☐ Discovery

☐ Appellate Division Opinion(s)

☐ Briefs filed in the Appellate Division

☐ Trial transcripts If yes, how many volumes:

☐ Briefs filed on Post-Conviction Relief

☐ Post-Conviction Relief Opinions

☐ Post-Conviction Relief Transcripts If yes, how many volumes:

☐ Federal Court Documents Specify:

☐ Other Legal Documents Specify:

23. Please list the name(s) of the attorney(s) who have represented you at past proceedings in your case:

Trial Name:

Direct Appeal Name:

Post-Conviction Relief Name:

Federal Proceedings Name: _____

Other: Name: _____

Please read the following provisions carefully and acknowledge your agreement by **placing your initials** after each paragraph and signing below:

(1) I understand that the CRU does not represent me as an attorney and cannot give me legal advice. I understand that if I **currently** have an attorney, all future communications must be made through my attorney. _____

(2) I understand that anything the CRU learns in the course of review or re-investigation may be shared with other law enforcement agencies. _____

(3) I understand this request for review does not extend any judicial time frames to file an appeal or petition for post-conviction relief. _____

(4) I understand that I have no right to a CRU review of my case and no right to appeal any CRU decision. _____

(5) I understand that the CRU will conduct a preliminary review of all cases in which a formal request has been made. I also understand that if the CRU accepts my case for further review, that does not mean I will receive relief. I understand that decisions about whether CRU will re-open a full case investigation, as well as how the claim will be investigated and resolved, will be made by the CRU. _____

(6) I agree to fully and openly cooperate with the CRU review, which includes allowing the CRU to contact and speak with my **previous** attorney(s) about any NON-PRIVILEGED matter, and allowing the CRU to see my client file, as maintained by my previous attorney(s), to review any information, other than privileged communications or attorney work-product contained within my file. _____

(7) I understand that information gathered by the CRU to review my application may be disclosed to appropriate third parties who may be assisting in the review of my case, including law students and innocence project volunteers. _____

(8) I understand that the CRU is under no obligation to respond to inquiries about your application or the status of any investigation by telephone in response to inquiries by you, friends, or family.

(9) I understand that the results of the CRU's review will only be shared with you or your attorney.

(10) I understand the CRU is part of the Attorney General's Office and the New Jersey State government. Information developed by the CRU may be shared with other government agencies if requested, including agencies responding to any wrongful compensation suit you may bring. The CRU conducts investigations independently. The CRU does not take into account the impact information may have on compensation claims. _____

Signature: _____

Dated: _____

Return the completed Request for Conviction Review form and any other documentation to the following address via US Mail:

Office of the Attorney General
Conviction Review Unit
P.O. Box 085
Trenton, New Jersey 08625-0085