CALIFORNIA WESTERN
INNOCENCE & JUSTICE CLINIC®

APPLICATION INSTRUCTIONS

The California Western Innocence and Justice Clinic ("CWIJC", formerly known as "The California Innocence Project") provides free legal assistance to wrongfully convicted individuals who are still incarcerated. For your case to be considered you must have:

- ✓ You have been convicted (after a trial or guilty/no contest plea)
- ✓ You already completed your appeals
- ✓ You are innocent of the crime for which you are imprisoned
- ✓ New evidence of your innocence exists or is discoverable

CWIJC is currently considering cases where the conviction occurred in:

San Diego County Superior Court	Imperial County Superior Court
Los Angeles County Superior Court	Riverside County Superior Court
Orange County Superior Court	San Bernadino County Superior Court
Southern District of California (Federal)	Central District of California (Federal)

Because we receive far more requests for legal assistance than we have capacity to accept, we will prioritize cases based upon a variety of factors, including (1) when we received your application, (2) the distance between the court in which you were convicted and CWIJC's office, (3) the length of time you have left to serve, and (4) your parole eligibility date.

Send your completed application and the signed and dated authorization to:

California Western Innocence & Justice Clinic
225 Cedar Street
San Diego, CA 92101

We will not consider applications that are incomplete, or that do not include a signed and dated authorization.

Please answer all questions truthfully, completely, and to the best of your ability so that we have complete information when we consider helping you with your case.

Do NOT send any additional documents with your application. Additional documents will not be reviewed and will not be returned.

Due to the high volume of requests for legal assistance, it may take months or even years to review your case. We will contact you to confirm receipt of your application, request additional information if needed, or provide an update on our review. If you do not hear from us, your application remains under review.

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

If you have copies of your trial and appellate case records, please keep them. If you don't have copies of your case records, we encourage you to contact your trial and appellate counsel to ask that your case file and transcripts be preserved. Thank you for your patience.

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A. BASIC INFORMATION ABOUT YOUR CONVICTION

Name: _____ Date of Birth: _____

CDCR/Booking #: _____ Race/Ethnicity: _____

Highest Level of Education: _____ Are you a veteran? ☐ **Yes** ☐ **No**

Are you booked or were you convicted under a different name? If so, what name?

_____

Current Prison/Jail/Brig: _____

(1) Where were you convicted?

☐ San Diego County Superior Court	☐ Imperial County Superior Court
☐ Los Angeles County Superior Court	☐ Riverside County Superior Court
☐ Orange County Superior Court	☐ San Bernadino County Superior Court
☐ Southern District of California (Federal)	☐ Central District of California (Federal)

If you were convicted in a different court, which one? _____

(2) On approximately what date did the alleged crime(s) occur? _____

(3) What police or sheriff's office investigated these crimes? _____

(4) Date of conviction(s): _____

(5) Case # _____

(6) Offenses for which you are incarcerated: Sentence Length:

a. _____ _____
b. _____ _____
c. _____ _____
d. _____ _____
e. _____ _____

(7) Which of the above listed charge(s) and convictions are you innocent of?
_____

(8) If you received more than one sentence, are they: ☐ **Concurrent** or ☐ **Consecutive?**

(9) Do you have an expected release date, if so, when? _____

(10) Do you have parole eligibility date, if so, when? _____

B. ATTORNEY & PROCEDURAL INFORMATION

(11) Trial attorney: _____

Address: _____

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Phone / Email: _____

(12) Did you go to trial? ☐ **Yes** or ☐ **No**

a. What type of trial was it?

☐ Jury Trial ☐ Bench Trial (judge only)

b. If you went to trial, what happened at the (first) trial?

☐ You were convicted of ☐ all or ☐ some of the charges,

☐ There was a mistrial because of an error during the trial,

☐ There was a mistrial; the jury was "hung" and couldn't reach a decision

c. If your first trial was a mistrial, what happened after that?

☐ You decided to take a deal/plea agreement

☐ There was a retrial, and you were convicted of some or ☐ all or ☐ some of the charges

(13) If you didn't go to trial, what plea did you enter:

☐ Guilty ☐ No Contest ☐ People v. West ☐ Alford Plea

(14) If you plead guilty or didn't contest the charges, why did you decide to do that?

_____

_____

(15) Did you appeal your conviction? ☐ **Yes** or ☐ **No**

(16) If you appealed your conviction:

a. Court of Appeal Case Number: _____ Date of decision: _____

b. Supreme Court Case Number: _____ Date of decision: _____

(17) Appellate attorney (if any): _____

Address: _____

Phone / Email: _____

(18) Have you previously filed any habeas petitions or other post-conviction motions?

☐ **Yes** or ☐ **No**

a. If yes, in which year did you file those? _____

b. In which court? _____

c. What was your argument in the post-conviction filings?

_____

(19) Current/other attorney: _____

Address/Phone/Email: _____

What is this attorney working on for you? _____

(20) Have your asked for help from other Innocence Organizations? ☐ **Yes** or ☐ **No**
If YES, which organizations? _____

C. WHAT REALLY HAPPENED

In this section, give as many details as possible. Feel free to use extra paper if necessary.

(21) Please describe your version of events that explains why you are innocent:

(22) Were you present at the scene of the crime when the crime occurred?

☐ No → If you were NOT at the crime scene, can you remember where you were and what you were doing when the crime occurred? Explain.

☐ Yes → Explain.

(23) How did you become a suspect?

(24) Did you confess to the crime(s)? If so, explain why you confessed:

D. PROSECUTION'S CASE

(25) Prosecutor name(s): _____

(26) Alleged Victim(s):
a. Name: _____

Did you know this person or have a relationship with them prior to the arrest in your case?
☐ **Yes** or ☐ **No**

If yes, explain: _____

b. Name: _____

Did you know this person or have a relationship with them prior to the arrest in your case?
☐ **Yes** or ☐ **No**

If yes, explain: _____

c. Name: _____

Did you know this person or have a relationship with them prior to the arrest in your case?
☐ **Yes** or ☐ **No**

If yes, explain: _____

d. Name: _____

Did you know this person or have a relationship with them prior to the arrest in your case?

If yes, explain: _____

[If there are more than 4 alleged victims, include them on a separate piece of paper.]

(27) What did the prosecutor say about when, where, and how the crime was committed? *(Give as many details as possible. Feel free to use extra pap*er.)

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

(28) We understand that you are claiming that you are innocent, but what did the prosecutor say you did? And what did they say your role in the case was?

_____
_____
_____
_____
_____
_____

_____

_____

(29) Do you remember the names of any of the officers who investigated your case or testified at trial? If so, list them here and the department they worked for:

Name: _____ Department: _____

Name: _____ Department: _____

Name: _____ Department: _____

Name: _____ Department: _____

Is there anything that makes you think one of these officers is corrupt or engaged in misconduct in your case? ☐ **Yes** or ☐ **No**

If yes, explain: _____
_____
_____
_____

(30) Did any expert witnesses testify for the prosecution? ☐ **Yes** or ☐ **No**

If yes, do you remember their name or what sort of expert they were (e.g. DNA expert, blood spatter expert, fingerprint analyst, medical examiner)? If so, list them here:

Name: _____ Expert Type: _____

Name: _____ Expert Type: _____

Name: _____ Expert Type: _____

Is there anything that makes you think one of these experts is a fraud or engaged in misconduct in your case? ☐ **Yes** or ☐ **No**

If yes, explain: _____
_____
_____
_____

E. CO-DEFENDANTS ("CO-DS")

(31) Were other people arrested, charged, or convicted for this same crime?

☐ No → If no, then you can skip this section and move on to Section F.

☐ Yes → If yes, please provide their names:

a. Name: _____ CDCR#: _____

☐ Same Trial ☐ Separate Trial ☐ Took a plea deal ☐ Charges Dismissed

b. Name: _____ CDCR#: _____

☐ Same Trial ☐ Separate Trial ☐ Took a plea deal ☐ Charges Dismissed

c. Name: _____ CDCR#: _____

☐ Same Trial ☐ Separate Trial ☐ Took a plea deal ☐ Charges Dismissed

(32) Did any of them make a statement to the police? ☐ **Yes** or ☐ **No**

If yes, what did they say: _____
_____
_____
_____
_____

(33) Did any of them testify against you? ☐ **Yes** or ☐ **No**

If yes, what did they say: _____
_____
_____
_____
_____

(34) Did you know your co-defendant(s) prior to the crime? ☐ **Yes** or ☐ **No**

If yes, please explain how you knew them and how well:

_____
_____
_____
_____

(35) Have you been in contact with them since your trial? ☐ **Yes** or ☐ **No**

If yes, please explain how often you are in contact and why: _____
_____
_____

F. THE DEFENSE CASE

(36) If you went to trial, did you testify?
☐ **I took a plea and didn't go to trial** *(if this is your answer, skip to the next page)*
☐ **Yes → if yes, what did you tell the jury/judge when you took the stand?**
☐ **No → if no, why did you decide not to testify?**

_____
_____
_____
_____

(37) What defense did you use at trial (check all that apply)

□ Alibi □ Mistaken ID[1] □ Consent □ False Confession □ Lack of evidence

□ Other, if "other," please explain: _____

[1] Mistaken ID is short for "mistaken identification," meaning the eyewitness said that they saw you but are mistaken.

(38) Did your attorney call any other witnesses to testify on your behalf?

☐ **Yes** ☐ **No** ☐ **I took a plea and didn't go to trial**

(39) If "yes," please list the witness called on your behalf and what they said:

Witness Name: _____

Was this person an expert witness? ☐ **Yes** ☐ **No**, if yes, what sort of expert? _____

What did they testify about? _____

_____

Witness Name: _____

Was this person an expert witness? ☐ **Yes** ☐ **No**, if yes, what sort of expert? _____

What did they testify about? _____

_____

[If other defense witnesses were called, list those on a separate page]

(40) Were there other witnesses you asked your attorney to call? ☐ **Yes** ☐ **No**

(41) If yes, who else did you want your attorney to call as a witness and why?

_____

_____

_____

G. New Evidence and Possible Investigation

(42) Please list the names of anyone who may have helpful information about your case, their contact information, and a short explanation of how they can help.

Name: _____ Contact info: _____

How can they help?

Name: _____ Contact info: _____

How can they help?

Name: _____ Contact info: _____

How can they help?

Name: _____ Contact info: _____

How can they help?

[If there are more people who are helpful, list them on a separate page.]

(43) Were there any other suspects who weren't arrested or charged? Anyone else you believe is responsible? Why?

_____

_____

_____

(44) Did any expert witness testify at your trial about the following topics (circle all that apply)?

Eyewitness Identifications	*Tool Marks*	*Abusive Head Trauma*	*Fiber Comparison*
False Confessions	*Tire Tracks*	*Ballistics*	*Gang Evidence*
Bit Marks	*DNA*	*Toxicology*	*Blood Spatter*
Hair Comparison	*Fingerprints*	*Shoe prints*	*Arson/Explosives*
Shaken Baby Syndrome	*Psychological Evaluations*	*GPS/Cell Phone Tower Data*	*Scent Detecting Dogs*

If you circled any topic above, briefly describe how the evidence was used at trial:

(45) Was any evidence not tested that you think would demonstrate your innocence or point to another suspect if it were tested or retested?

☐ **Yes** ☐ **No** If yes, please explain:

(46) Did any of the witnesses who testified against you have reasons to lie?

☐ **Yes** ☐ **No** If yes, please explain:

(47) Is there any evidence of your innocence that wasn't known or presented at trial that you know of now?

☐ **Yes** ☐ **No** If yes, please explain:

(48) During your case, did your attorney, the prosecutor, the police, the judge, a juror, a witness make any statements regarding your race or nationality for any purpose other than making an identification of you?

☐ **Yes** ☐ **No** If yes, please explain:

_____

_____

(49) Do you have any disabilities that may have affected your case or may impact your ability to communicate with us?

☐ **Yes** ☐ **No** If yes, please explain:

_____

_____

_____

_____

(50) Was there anything that happened at trial that made you think you were discriminatorily targeted (i.e. sexual orientation, gender/gender identity, religion, etc.)?

_____

_____

_____

_____

(51) Were you convicted of felony murder? If so, what did the jury determine whether you were the actual killer?

_____

_____

_____

_____

(52) Is there anything else you think would be helpful for us to know when considering whether to take your case?

_____

_____

_____

_____

(53) Do you have access to any of the following documents (check any you have):

☐ Police Reports ☐ Lab Reports ☐ Guilty Plea Hearing Transcripts

☐ Appeal Briefs ☐ Trial transcripts ☐ Other: _____

If not, if there is someone who may have any of the documents listed, please include that person's name and how to contact them: _____

_____

(54) If there is a person you trust that we can call with updates on your case, please list their names and how to contact them: _____

_____

AUTHORIZATION

A. Communication in General

This document, or photocopy thereof, expressly authorizes The California Western Innocence & Justice Clinic ("CWIJC"), which includes any attorney, law student, intern, investigator, expert, staff member, or anyone else working for or with WCIJC to communicate with anyone who has information about me, my case, or my incarceration. This includes all of my previous and current attorney(s),, any correctional institution where I am housed or used to be housed, the California Department of Corrections & Rehabilitation, 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 CWIJC believes I pertinent to the review, investigation, or evaluation of my case.

B. Release and Copy of Documents or Other Materials

This document, or photocopy thereof, expressly authorizes and directs anyone or any agency in possession of materials pertaining to me, my case, or my incarceration (including disciplinary proceedings), to release them to CWIJC for examination and copying. This includes, but is not limited to any documents, photographs, audio, video, and digital files.

C. Communication with Prior Attorneys

This document, or 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 CWIJC.

D. Waiver of Confidentiality

I fully understand that there may be statues, 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 statues, rules, and regulations to the extent necessary to share the above information with CWIJC.

E. Representation

I understand that, at this time, CWIJC does not agree to represent me in any current or future legal proceedings. If CWIJC decides to represent me in the future, I will be asked to sign a separate pro bono retainer agreement detailing the scope of representation.

In addition, I consent to have a law student work on my case who is certified by the State Bar of California in accordance with the provisions of California Rules of Court, rule 9.42.

F. Expiration of Authorization

I understand that review and evaluation of my case may take months or 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: _____

_____
(signatures)

_____

(printed name)