

**Superior Court of California,  
County of Mariposa**



**Certificate of Rehabilitation  
& Pardon Instruction Packet**



**Superior Court of California,  
 County of Mariposa  
 5088 Bullion Street  
 PO Box 28  
 Mariposa, CA 95338**

**Certificate of Rehabilitation and Pardon  
 Quick Reference for Restoration of Rights**

In California, the granting of a Certificate of Rehabilitation or a Governor's Pardon restores to the applicant some rights of citizenship that were forfeited as a result of a conviction.

Certificate of Rehabilitation	Governor's Pardon
<p>Does:</p> <ul style="list-style-type: none"> <li>◆ Relieve some sex offenders, as specified, of further duty to register. (Pen. Code § 290.5)</li> <li>◆ Enhance a felon's potential for licensing consideration by a State Board. (Pen. Code § 4853)</li> <li>◆ Serve as an official document to demonstrate a felon's rehabilitation.</li> <li>◆ Serve as an automatic application for a gubernatorial pardon.</li> </ul>	<p>Does:</p> <ul style="list-style-type: none"> <li>◆ Allow restoration of firearms rights, upon federal approval, to specified offenders who have obtained a Certificate of Rehabilitation. (Pen. Code § 4852.17)</li> <li>◆ Allow a felon to be considered for appointment as a county probation officer or a state parole agent. (GOV. Code § 1029, subd. (c))</li> <li>◆ Allow specified sex offenders still required to register after obtaining a Certificate of Rehabilitation to be relieved of their duty to register. (Pen. Code § 290.5)</li> </ul>
<p>Does Not:</p> <ul style="list-style-type: none"> <li>◆ Erase Felony Conviction or seal record. (Pen. Code § 4852.17)</li> <li>◆ Prevent the offense from being considered a prior conviction</li> <li>◆ Allow a felon to answer no on employment applications that he/she has no record of conviction.</li> <li>◆ Restore the right to possess a firearm.</li> </ul>	<p>Does Not:</p> <ul style="list-style-type: none"> <li>◆ Erase Felony Conviction or seal record. (Pen. Code § 4852.17)</li> <li>◆ Prevent the offense from being considered a prior conviction</li> <li>◆ Allow a felon to answer no on employment applications that he/she has no record of conviction.</li> <li>◆ Restore the right to own firearms to felons convicted of any offense involving the use of a dangerous weapon. (Pen. Code § 4854)</li> <li>◆ Pardon federal or out-of-state convictions.</li> <li>◆ Necessarily prevent deportation.</li> </ul>



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## Certificates of Rehabilitation in Mariposa County: *Filing Instructions*

- 1) You must be a resident of Mariposa County, or have been convicted of a Felony in Mariposa County, to file a Petition for Certificate of Rehabilitation in Mariposa County. The offense may have occurred in another county.
- 2) Complete the Notice of Filing for Certificate of Rehabilitation. Do **not** fill in a Court date or time.
- 3) Complete the Petition for Certificate of Rehabilitation.
- 4) Make 4 copies of each document.
- 5) File both forms with the Court; there will not be a filing fee. (Pen. Code § 4852.09)
- 6) The Clerk will set a hearing date, approximately 35 days out (30 days + 5 days for service by mail), and stamp the hearing details on the Notice of Filing of Petition for Certificate of Rehabilitation.
- 7) The Court will keep the original filed document, and return all conformed copies. You will need to serve documents on all parties, or the Court may not consider the Petition at the time of the hearing. Documents need to be served approximately 30 days before the hearing. Serve documents on the following parties:

Governor	District Attorney	The District Attorney in the
State Capitol Building	PO Box 730	CA county in which you were
Sacramento, CA 95814	Mariposa, CA 95338	convicted if not Mariposa.
- 8) File a Proof of Service with the Court after serving the documents on all parties.
- 9) You may hear from the District Attorney's office in regards to further investigation.
- 10) Attend the hearing.



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## **Certificates of Rehabilitation in Mariposa County:**

### ***Eligibility Criteria***

- ◆ A person convicted of a felony who is committed to a state prison or other institution or agency, including commitment to a county jail pursuant to subdivision (h) of Section 1170, may file a petition for a certificate of rehabilitation and pardon pursuant to the provisions of this chapter.
- ◆ A person convicted of a felony or a person who is convicted of a misdemeanor violation of any sex offense specified in Section 290, the accusatory pleading of which has been dismissed pursuant to Section 1203.4, may file a petition for certificate of rehabilitation and pardon pursuant to the provisions of this chapter if the petitioner has not been incarcerated in a prison, jail, detention facility, or other penal institution or agency since the dismissal of the accusatory pleading, is not on probation for the commission of any other felony, and the petitioner presents satisfactory evidence of five years' residence in this state prior to the filing of the petition.
- ◆ This chapter does not apply to persons serving a mandatory life parole, persons committed under death sentences, persons convicted of a violation of Section 269, subdivision (c) of Section 286, subdivision (c) of Section 287, Section 288, Section 288.5, Section 288.7, subdivision (j) of Section 289, or subdivision (c) of former Section 288a, or persons in military service.
- ◆ Notwithstanding any other law, the Governor has the right to pardon a person convicted of a violation of Section 269, subdivision (c) of Section 286, subdivision (c) of Section 287, Section 288, Section 288.5, Section 288.7, subdivision (j) of Section 289, or subdivision (c) of former Section 288a, if there are extraordinary circumstances.

***\*See attached "Quick Reference for Restoration of Rights"\****



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## Applying for a Governor's Pardon: *Application Instructions*

For most people, obtaining a Certificate of Rehabilitation from the Superior Court in your county is the first step to applying for a pardon. Those who are not a resident of California, or ineligible for a Certificate of Rehabilitation, must use a direct Pardon application. There is not a fee for applying for a Pardon.

### ◆ Certificate of Rehabilitation

Upon a Certificate of Rehabilitation being granted, it is forwarded to the Governor's Office, where it automatically becomes an application for a Governor's Pardon. The Governor's receipt of a Certificate does not mean that a Pardon will be granted.

### ◆ Direct Pardon

A Direct Pardon is available to those who live out of state, or are ineligible to apply for a Certificate of Rehabilitation. Applications can be obtained at [www.gov.ca.gov](http://www.gov.ca.gov), or by requesting an application in writing at the following address:

Governor's Office  
State Capitol  
Attn: Legal Affairs  
Sacramento, CA 95814

The applicant should complete the Application for Executive Clemency, and send the Notice of Intent to Apply for Executive Clemency to the District Attorney in each county that the applicant was convicted in. The District Attorney acknowledges the receipt of the Notice of Intent, and returns it to the Governor's Office. Finally, the applicant should return the completed application to the Governor's Office.

There is not a requirement that the Governor take any action on an application for a Pardon. Once a Certificate of Rehabilitation or a Direct Pardon is received, the Office typically forwards it to the Board of Parole Hearings. The Board may conduct a background investigation and make a recommendation. If the applicant was convicted of multiple felonies, a recommendation must be made by the California Supreme Court before the Governor may grant the Pardon. The length of time for the Pardon to be completed is not able to be predicted; the applicant will be notified if any action is taken. Applicants should notify the Governor's Office in writing if their mailing address changes.

***\*See attached "Quick Reference for Restoration of Rights" to understand the effect of 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*

**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

## RESIDENCY HISTORY

I am now a resident of the State of California, and I have continuously resided in the State of California from \_\_\_\_\_, to the present date.  
Month Day, Year

## APPLICANT'S DECLARATION

*During the period of my rehabilitation, I have lived an honest and upright life, conducted myself with sobriety and industry, and exhibited good moral character. I have conformed to and obeyed all the laws of the land.*

**WHEREFORE,** Your petitioner prays that the Court make its order and decree declaring that the petitioner has been rehabilitated; and for a Certificate of Rehabilitation recommending that the Governor of the State of California grant petitioner a full pardon; and that for such purpose, a time be appointed for the hearing of the foregoing petition; and that other and necessary proper orders may be made in the premises.

\_\_\_\_\_  
Applicant's Signature

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

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

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



## FORM 1 INSTRUCTIONS

1. After completing the ***Petition for Certificate of Rehabilitation and Pardon***, file it with the Superior Court 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.
  - To the **five (5)** years there shall be added **five (5)** years in the case of any person convicted of any offense or attempted offense for which sex offender registration is required pursuant to P.C. 290, except for convictions for violations of subdivision (b), (c), or (d) of Section 311.2, or of Section 311.3, 311.10, or 314. For those convictions, two years shall be added to the five years imposed by this section.
  - 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 the \_\_\_\_\_ day of \_\_\_\_\_  
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 of \_\_\_\_\_, county of \_\_\_\_\_ state of California.  
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 of \_\_\_\_\_, State 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

_____ <small>Full Name - First Middle Last and Suffix, if applicable</small>	_____ <small>Street Address</small>	_____ <small>County</small>
_____ <small>Full Name - First Middle Last and Suffix, if applicable</small>	_____ <small>Street Address</small>	_____ <small>County</small>
_____ <small>Full Name - First Middle Last and Suffix, if applicable</small>	_____ <small>Street Address</small>	_____ <small>County</small>
_____ <small>Full Name - First Middle Last and Suffix, if applicable</small>	_____ <small>Street Address</small>	_____ <small>County</small>

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 Superior Court in the county in which you reside.