PARDON AND FORGIVENESS APPLICATION INFORMATION

ELIGIBILITY REQUIREMENTS

A Tribal member may receive a pardon for any criminal conviction(s), or forgiveness for an act(s) that renders the Tribal member ineligible for housing with the Tribe or other Tribal benefit(s); and any individual may receive forgiveness for an act(s) that renders the individual ineligible for Tribal employment, an occupational license, certification or permit issued by the Tribe.

- Tribal members shall be eligible for a pardon <u>upon completion</u> of incarceration, parole, probation and/or deferred prosecution.
- b) An individual shall be eligible to apply for pardon or forgiveness one (1) year after an act is committed, or affirmed through the conclusion of any appeal process;

An individual is **ineligible** for a pardon or forgiveness if he or she is:

- a) being investigated for an act and if found to have committed such act, would be ineligible for the benefit he or she is seeking; or
- b) appealing a termination and the termination makes him or her ineligible for the benefit he or she is seeking; or
- c) currently incarcerated, on parole, probation, and/or under a deferred prosecution agreement; or
- d) has any outstanding penalties or fines.

APPLICATION REQUIREMENTS

A) The following must be submitted with your completed Pardon application:

- 1) A copy of the applicant's valid Tribal enrollment card.
- 2) A copy or copies of any discharge papers from incarceration or jail.
- 3) Official verification of any successful completion date of the probation, parole, or deferred prosecution.
- 4) Any necessary releases for investigations and/or background checks.
- 5) Any authorizations from a probation officer to release information.
- 6) The application fee is \$0 pursuant to BC Resolution # 12-13-23-A.
- 7) A personal written statement, including the reason(s) for requesting a pardon and a description and documentation of the applicant's efforts towards self-improvement.
- 8) Information regarding the conviction(s) for which the applicant is seeking a pardon, including:
 - Date(s) upon which the crime(s) occurred;
- Date(s) of conviction(s); and
- Location(s) where the crime(s) occurred;
- Jurisdiction(s) which imposed the sentence(s).
- 9) Verification of attendance or successful completion of any counseling, therapy, or rehabilitative programs such as anger management or coping skills classes.
- 10) Letters of reference or support from people well-regarded in the community. Such letters shall detail the applicant's accomplishments or contributions to the community or attest to the applicant's rehabilitation and trustworthiness. These may include, but are not limited to:
 - Clergy or other spiritual leaders.
- Teachers.
- Employers and/or community members.
- Organizers of support groups the applicant attended
- 11) Any other information relevant to the applicant's conviction(s) or rehabilitation efforts.
- 12) Proof of payment of all penalties and fines.

B) The following must be submitted with your completed Forgiveness application:

- 1) A copy of the applicant's valid Tribal enrollment card, if applicable.
- 2) The applicant's employment record prior to the act, if applicable.
- 3) The applicant's background records.
- 4) The act that triggered the applicant's ineligibility.
- 5) The impact of the act on the Tribe.
- 6) The length of time since the act.
- 7) A written statement from the applicant demonstrating remorse for the violation.
- 8) Two (2) letters of recommendation, with no more than one (1) recommendation coming from a person who is a family member of the applicant.
- 9) The application fee is \$0 pursuant to BC Resolution # 12-13-23-A.
- 10) Any additional credible and relevant information.
- 11) Proof of payment of all penalties and fines.

APPLICATION DEADLINES:

Completed applications are reviewed by the Pardon and Forgiveness Screening Committee four (4) times each year. If a deadline falls on a Saturday or Sunday, the deadline will be on the Friday before.

PERIOD BEGINS	PERIOD DEADLINE	HEARINGS ARE HELD THE 3 RD THURSDAY OF
October 1	December 31	February
January 1	March 31	May
April 1	June 30	August
July 1	September 30	November

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

Failure of the applicant to provide a complete application or any of the required information and/or materials may result in:

- a) The application being returned with a request for more information; or
- b) The application being removed from consideration; or
- c) Denial of pardon or forgiveness.

HOW TO CONTACT OUR OFFICE:

Phone: (920) 869-4303 Email: <u>Secretary@oneidanation.org</u>

Mail: Government Administrative Office In Person: Government Administrative Office

PO Box 365 N7210 Seminary Rd Oneida WI 54155-0365 Oneida WI 54155

Oneida Nation

Oneida Pardon and Forgiveness Screening Committee
PO Box 365 • Oneida, WI 54155-0365
oneida-nsn.gov



Pardon and Forgiveness Application

	Pardon	S					
	-			Soc. Sec. #:			
(IF APP	LICABLE)						
Name:							
FIRST	MIDDLE	MIDDLE		LAST		MAIDEN	
Street Address:	FREET						
ST	TREET	APT	CITY		STATE	ZIP	
Mailing Address:							
(if different from above)	STREET/PO BOX	APT	CITY		STATE	ZIP	
hone:	Em	ail:					
lace of Birth: Driver's License			nse #:	State Held:			
łave you held a lid	cense in another state?	☐ Yes	□ No	If ves, v	hich state:		
•				,,,,,,			
vas your license e	ever held or revoked?	☐ Yes	☐ No				
f yes, why?							
	R NAMES List any aliases or p						
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SECTION 4: CONVICTIONS List all convictions for	which a pardon or forgiveness is being sought, attach additional pages if needed.	
1. Convicted of:		
Conviction Date:	Sentence:	
State of Conviction:	Probation/Parole Release Date:	
2. Convicted of:		
Conviction Date:	Sentence:	
State of Conviction:	Probation/Parole Release Date:	
3. Convicted of:		
Conviction Date:	Sentence:	
State of Conviction:		
4. Convicted of:		
Conviction Date:	Sentence:	
State of Conviction:	Probation/Parole Release Date:	
SECTION 5: SPECIAL CIRCUMSTANCES – OP	TIONAL (List any additional information you would like considered)	
SECTION 6: APPLICANT SIGNATURE, ACKNO	DWLEDGMENT AND RELEASE	
 provided on and included with this appl I understand the duties and responsibility Forgiveness Committee, Oneida Business involved in the granting or denial of participation Forgiveness law. 	ijury, depose and say that all information and documentation, ication is true and correct to the best of my knowledge. ties of myself as the applicant and of the Oneida Pardon and is Committee, Oneida Secretary's Office, and other persons dons and forgiveness pursuant to Chapter 126 Pardon and items the Pardon and Forgiveness Screening Committee or their bound check related to this application.	
Signature:	Date:	