INSTRUCTIONS FOR COMPLETING PARDON APPLICATION

1. COMPLETE FORM IN BLACK INK AND ENSURE IT IS SIGNED BEFORE A NOTARY PUBLIC.

2. YOU WILL NEED TWO (2) PEOPLE (WHO PERSONALLY KNOW YOU) TO COMPLETE THE CHARACTER AFFIDAVITS. THE AFFIDAVITS MUST ALSO BE COMPLETED IN BLACK INK AND SIGNED BEFORE A NOTARY PUBLIC.

3. MAIL COMPLETED NOTARIZED PARDON APPLICATION AND THE TWO (2) NOTARIZED CHARACTER AFFIDAVITS TO:

HAWAII PAROLING AUTHORITY
ATTN: PAROLES AND PARDONS ADMINISTRATOR
1177 ALAKEA STREET, GROUND FLOOR
HONOLULU, HAWAII 96813

It is important to note that a pardon is not a right, but an exceptional privilege, which only the Governor has the power to grant.

For criminal convictions in the state courts of Hawaii, the pardon process starts with the completion of the pardon application form. Once the application is submitted as instructed, it is reviewed and investigated by the Hawaii Paroling Authority, the Department of Public Safety and the Department of the Attorney General. Reviews and investigations often include interviews with not only the applicant, but with references listed by applicants and others whom are identified through investigation. Therefore, it can be a lengthy process.

After submitting your application, if you have changes to your residence or mailing address, contact telephone number(s), employment, and/or marital status, please immediately notify this agency in writing at the address provided above so that can update your application.

The Governor can only grant pardons for criminal convictions which have occurred in the state courts of Hawaii. Any criminal convictions, which occurred in other states or in federal court, would have to be addressed through the processes of those jurisdictions.

You should note that a pardon is different from an expungement, where a crime is deleted from one’s criminal record. The Governor does not have the power to expunge a record. Further, in the State of Hawaii, expungements are only provided for in certain situations. Information regarding expungement matters should be addressed with the State of Hawaii’s Department of the Attorney General. A pardon does not involve, nor is it a step toward an expungement. Further, while a pardon may be helpful to one’s employability, employers can differ on whether a pardon alone will suit their requirements. We hope that the foregoing provides some guidance on what this process entails and how to begin the process of applying for a pardon.
STATE OF HAWAII  
EXECUTIVE CHAMBERS  
PARDON APPLICATION  

DATE ____________________

The Governor of Hawaii  
State Capitol, 5th Floor  
Honolulu, Hawaii 96813

I ____________________________  
(Full Name)  
First Middle Last

a citizen of ________________________________, respectfully

request from your Excellency, a pardon for the following convictions:

<table>
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<tr>
<th>Crime</th>
<th>Date of Conviction</th>
<th>Date of Sentence</th>
<th>Court Location</th>
<th>Court Disposition</th>
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I was released from prison on parole on ____________________________

My parole/probation period expired and I was discharged from parole/probation on ____________________________

(Strike inappropriate word)  (Strike inappropriate word)
PERSONAL INFORMATION

1. Birth Date: ________________________ Social Security Number: ________________________

2. Place of Birth: ________________________

3. Full Names of Parents: __________________________________________________________

4. Full Names of Siblings (Brothers and Sisters and Ages): ______________________________

5. | Schools Attended (From First Grade) | Years Attended | Location | Date Graduated |
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6. Married: Yes____ No_____ Date Married: ________________________
   Name and Address of Spouse: ______________________________________

7. Children: Yes_____ No_____ Names and Ages: ________________________
   Children All Living With Me: Yes_____ No_____
   If No, explain: __________________________________________________

8. Present Address: _______________________________________________________
   I have lived here since: ________________________

9. Phone Number: ________________________

10. List all employment since leaving school beginning with your last job:
    | Employer | Dates of Employment | Phone and Address (If available) |
    |----------|---------------------|----------------------------------|
    |          |                     |                                  |
    |          |                     |                                  |
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    |          |                     |                                  |
    |          |                     |                                  |

11. Military Service and Dates: ________________ through ________________

Honorable Discharge: Yes____ No______ If No, Type of Discharge: __________________________

12. I belong to the following organizations and activities (including Church affiliation):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

13. The reasons I am asking for this pardon are:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

________________________________________________________________________

Signature of Applicant

At least two character affidavits are desirable and should be notarized and submitted with each application.

PERSONAL OATH

I, ____________________________, residing at ____________________________,

In asking for a pardon, do solemnly swear that I will be law abiding in the future and will support and defend the Constitution of the United States against all enemies, foreign and domestic, and that I take this obligation freely and without mental reservation whatsoever, so help me.

________________________________________________________________________

Signature

Subscribed and sworn to before me this ____________________________ day of ________________, A.D. 20______________

Notary Public

Judicial Circuit, State of Hawaii

My Commission Expires: ____________________________

HPA-020 (Revised 04/13)
STATE OF HAWAII
EXECUTIVE CHAMBERS

CHARACTER AFFIDAVIT

I, ____________________________, residing at ________________________________

By occupation ____________________________ dose and certify that I have personally known

______________________________ for more than ______________________ year(s) and to the best

of my knowledge and belief(s) he/she has, since being released from prison/parole/probation on or about ____________

(Strike inappropriate word)

______________________________, conducted themselves in a moral and law-abiding manner.

That ____________________________ is at present employed by

______________________________ at ________________________________

in the capacity of ____________________________ and has been employed by them for ____________ years.

My knowledge of his/her activities and conduct since being released from prison/parole/probation is as follows:

(Strike inappropriate word)

(Here state in full detail your knowledge of the applicant’s conduct, etc. and also, specifically, whether: since their release
from prison, they have been arrested or has had any trouble with public authorities or any others).

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

This affidavit is made by me, in support of the application of ____________________________
made to the Governor of the State of Hawaii for a pardon to restore their full civil rights.

________________________________________
(Signature)

Subscribed and sworn to before me this ________________ day of ____________________________, A.D. 20__________

Notary Public ____________________________________
Judicial circuit, State of Hawaii
My Commission Expires: ____________________________
STATE OF HAWAII  
EXECUTIVE CHAMBERS  

CHARACTER AFFIDAVIT

I, _______________________________________, residing at ________________________________

By occupation _______________________________________________________________ depose and certify that I have personally known

______________________________for more than ________________ year(s) and to the best

of my knowledge and belief(s) he/she has, since being released from prison/parole/probation on or about ____________

(Strike inappropriate word)

______________________________, conducted themselves in a moral and law-abiding manner.

That _________________________________ is at present employed by

______________________________
at _______________________________________

in the capacity of _______________________________ and has been employed by them for ____________ years.

My knowledge of his/her activities and conduct since being released from prison/parole/probation is as follows:

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from prison, they have been arrested or has had any trouble with public authorities or any others).

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__________________________________________

(Signature)

Subscribed and sworn to before me this ________________ day of ____________________________, A.D. 20_____________

__________________________________________
Notary Public  
Judicial circuit, State of Hawaii  
My Commission Expires: ____________________________