PARDON INFORMATION AND INSTRUCTIONS

Please read carefully before completing the pardon application.

IMPORTANT NOTICE
The information that we request from you on the accompanying pardon application form and in any background investigation, is needed to elicit the broad range of information required to allow the Governor to make an informed judgment of the applicant's suitability for pardon. You are under no obligation to furnish any information. However, if you do not provide all the information requested, we will not be able to process your application.

Individuals who have been convicted of a crime in the State of Hawaii may apply for a gubernatorial pardon. 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 to people who have demonstrated exemplary behavior following their conviction. The Governor can only grant pardons for criminal convictions which have occurred in the State Courts of Hawaii. Any criminal convictions that occurred in other states or in the Federal Court, would have to be addressed through the processes of those jurisdictions.

Submit the Pardon Application and Character Affidavits to the Hawaii Paroling Authority (HPA)
A person seeking a gubernatorial pardon shall complete the official four (4) page State of Hawaii pardon application and three (3) character affidavits without any alterations to the 7-page forms packet. Following completion and required notarization of the application and all three (3) of the character affidavits, submit the documents via mail to: HAWAII PAROLING AUTHORITY, ATTN: FIELD PAROLE BRANCH ADMINISTRATOR, 1177 ALAKEA STREET, GROUND FLOOR, HONOLULU, HAWAII 96813. The pardon application and character affidavits must be:

1. Completed in its entirety
2. Entirely legible
3. No two-sided copies
4. Application and three (3) character affidavits are required and must be notarized
5. Persons related by blood or marriage CANNOT be used for the character affidavits
6. May attach additional pages and documents
7. Meets eligibility requirements
   a. Demonstrate the ability to live a pro-social lifestyle for a significant period of time. Minimum five (5) years waiting period after the date of release from confinement, parole, probation and/or sentence imposed.
   b. No current convictions(s)
   c. No pending charge(s)
   d. Fine, fees, restitution, etc. paid off
   e. Financial stability
   f. Law-abiding citizen

Military Record
If you ever served in the armed forces of the United States, submit a copy of your separation papers (Form DD-214) for verification of service.
Effect of a Pardon
A pardon is different from an expungement, where a crime is deleted from the applicant's criminal record. **A pardon does not erase or expunge the records of conviction.** When a pardon is granted, the criminal history record will show both the conviction and pardon.

The Investigation Process
The pardon investigation process can be lengthy as it is a thorough process. It starts with the completion of the pardon application and three (3) character affidavits. Once the required documents are submitted as instructed, it is reviewed and investigated by the Hawaii Paroling Authority (HPA), the Department of Public Safety (DPS) and the Department of the Attorney General (AG). If a submitted pardon application is incomplete or does not sufficiently answer or meets the criteria, the HPA will contact the applicant and explain what information is required. Investigations often include interviews with the applicant, those persons who have executed the character affidavits and others whom are identified through the investigation.

Applicant Information Updates
After submitting your application, if any information changes such as residence or mailing address, telephone number, email, employment, etc., please immediately notify the HPA in writing via mail so that we can ensure your application packet is updated.

Status Updates
The HPA does not disclose information regarding the nature of results of any investigation or the exact point in the pardon process at which an application is pending. **When a status update is requested, the HPA can only advise you as to whether your application remains under consideration.** You will be notified directly by the Governor's Office when a final decision is made.

Reapplying
An applicant whose request for a pardon is denied, may reapply any time after two (2) years from the date of the Governor's denial. To reapply for a pardon, a person must complete and submit a new application form that contains current information in response to all questions and new character affidavits. Resubmitting the prior application form that was previously denied is not an acceptable form of reapplication.
STATE OF HAWAII
EXECUTIVE CHAMBERS

PARDON APPLICATION

Date ______________

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

Full Name: I, __________________________________________

First       Middle       Last

Other Names including the name which you were convicted (i.e. maiden name, name by a former marriage, aliases)

a citizen of __________________________________________, respectfully request from your Excellency,
a pardon for the following convictions:

<table>
<thead>
<tr>
<th>Crime</th>
<th>Conviction Date</th>
<th>Sentence Date</th>
<th>Court</th>
<th>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. Date of Birth: ______________________  Place of Birth: ______________________


4. Physical Address: __________________________________________________________
   Years resided at physical address: ________________________________

5. Mailing Address: _________________________________________________________

6. Cell Number: ______________  Home Number: ______________________

7. Email Address: __________________________________________________________


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<th>Full Name of Spouse</th>
<th>Date of Marriage</th>
<th>Date of Divorce</th>
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<td>Address</td>
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9. List Children by name, age and date of birth for each:
   If you have no children, indicated that the question is not applicable. If you need more space, use a continuation page.

<table>
<thead>
<tr>
<th>Full Name of Child</th>
<th>Date of Birth</th>
<th>Age</th>
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All Children Living With Me: Yes________ No________
   If No, explain: _______________________________________

10. List Parents Full Names: ________________________________

11. List Siblings (brother and sister) by name and ages for each:
   If you have no siblings, indicated that the question is not applicable. If you need more space, use a continuation page.

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<thead>
<tr>
<th>Name of Sibling</th>
<th>Age</th>
<th>Name of Sibling</th>
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12. Educational History
List all schools you have attended starting from Kindergarten, beginning from elementary and working to the most recent. If you need more space, use a continuation page.

<table>
<thead>
<tr>
<th>School Name</th>
<th>Dates: From – To (Month/Year)</th>
<th>Location (City and State)</th>
<th>Year Graduated</th>
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13. Employment History
List all employment and unemployment since leaving school, beginning with the present and working backward. If you need more space, use a continuation page.

<table>
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<tr>
<th>Employer</th>
<th>Date: Start - Ended (Month/Year)</th>
<th>Address and Telephone Number</th>
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14. Military Record
Have you ever served in the armed forces of the United States?  Yes_______  No_______
Dates of Service: __________________________ Branch: __________________________
Type of Discharge: __________________________

15. Community Activities
List any organizations, clubs, church and/or activities you’re affiliated with:

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3
16. Have you ever applied for a State of Hawaii gubernatorial pardon before?  Yes_____ No_____

If Yes, what year(s): ________________________________________________

17. Are you requesting express authorization to own and/or possess firearms?  Yes_____ No_____

18. Reason for Seeking Pardon
State your reasons for seeking a pardon. If you need more space, use a continuation page.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

__________________________________________
Signature of Applicant

At least three (3) character affidavits are required and must be notarized and submitted with each pardon application.

CERTIFICATION AND PERSONAL OATH

I, ____________________________, residing at ____________________________,
I hereby certify that all answers to the above questions contained herein are true and correct to the best of my knowledge, information, and belief.

In petitioning the Governor of the State of Hawaii for pardon, I 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 ____________________, 20_____

Notary Public ____________________________
My Commission Expires: ____________________________

HPA-020 (Revised 12/2017 – Effective 01/02/2018)
STATE OF HAWAII
EXECUTIVE CHAMBERS

CHARACTER AFFIDAVIT

I, ________________________________________________________________
(Print Your Full Name)

residing at _________________________________________________________
Number Street City State Zip Code

____________________________________, whose occupation is
(Telephone Number Including Area Code)

depose and certify that I have personally known the petitioner for more than ____________ year(s). To the best
of my knowledge and belief(s) he/she has, since being released from prison/parole/probation conducted themselves in a
moral and law-abiding manner. (Strike Inappropriate Word)

That ____________________________________________ is currently employed by
(Print Name of Petitioner)

___________________________________________ at ____________________________
(Employer) (Location)

in the capacity of ________________________________ and has been employed by them for ____________ year(s).
(Position Title)

My knowledge of petitioner’s reputation, conduct and activities, since their release, including whether the petitioner has
been arrested or had any other trouble with public authorities is as follows:
(If you need more space, use a continuation page).

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

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 civil rights.

I do solemnly swear that the foregoing information is true and correct to the best of my knowledge, information, and
belief.

______________________________________________________________
Signature

Subscribed and sworn to before me, this
day of ____________, 20________

Notary Public
My Commission Expires:

HPA-020 (Revised 12/2017 – Effective 01/02/2018)
STATE OF HAWAII
EXECUTIVE CHAMBERS

CHARACTER AFFIDAVIT

I, _______________________________,
(Print Your Full Name)

residing at _______________________________,
Number Street City State Zip Code

__________________________, whose occupation is _________________________________.
(Telephone Number Including Area Code)

depose and certify that I have personally known the petitioner for more than ____________________ year(s). To the best
of my knowledge and belief(s) he/she has, since being released from prison/parole/probation conducted themselves in a
moral and law-abiding manner.

(Swipe Inappropriate Word)

That ________________________________________________________________ is currently employed by
(Print Name of Petitioner)

______________________________________________________________
(Employer) (Location)

in the capacity of ___________________________________________ and has been employed by them for __________ year(s).
(Position Title)

My knowledge of petitioner’s reputation, conduct and activities, since their release, including whether the petitioner has
been arrested or had any other trouble with public authorities is as follows:
(If you need more space, use a continuation page).

_________________________________________________________________
_________________________________________________________________
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_________________________________________________________________

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 civil rights.

I do solemnly swear that the foregoing information is true and correct to the best of my knowledge, information, and
belief.

_________________________________________  Signature

Subscribed and sworn to before me, this
_________________________ day of _____________, 20________

Notary Public

My Commission Expires: ____________________

HPA-020 (Revised 12/2017 – Effective 01/02/2018)
STATE OF HAWAII  
EXECUTIVE CHAMBERS  

CHARACTER AFFIDAVIT  

I, ____________________________________________, (Print Your Full Name) residing at ____________________________________________, whose occupation is ____________________________________________,  

(Telephone Number Including Area Code)  

depose and certify that I have personally known the petitioner for more than ______________________ year(s). To the best of my knowledge and belief(s) he/she has, since being released from prison/parole/probation conducted themselves in a moral and law-abiding manner.  

That _______________________________ is currently employed by ____________________________________________, (Print Name of Petitioner)  

_____________________________  

(Employer)  

at ____________________________________________, (Location)  

in the capacity of _______________________________ and has been employed by them for ______________________ year(s).  

(Position Title)  

My knowledge of petitioner’s reputation, conduct and activities, since their release, including whether the petitioner has been arrested or had any other trouble with public authorities is as follows:  
(If you need more space, use a continuation page).  

_________________________________  

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_________________________________  

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 civil rights.  

I do solemnly swear that the foregoing information is true and correct to the best of my knowledge, information, and belief.  

_________________________________  

Signature  

Subscribed and sworn to before me, this ______________________ day of ____________________, 20______  

Notary Public  

My Commission Expires:  

HPA-020 (Revised 12/2017 – Effective 01/02/2018)