

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.

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

APPLICATION REQUIREMENTS

A) A completed Pardon application shall include the following:

- 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) A **\$50.00 non-refundable fee** made payable to the Oneida Nation. Acceptable forms of payment include: Money Order, Cashier's Check or Inter-tribal purchase document
- 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 attends or has 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) A completed Forgiveness application shall include the following:

- 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) A **\$50.00 non-refundable fee** made payable to the Oneida Nation. Acceptable forms of payment include: Money Order, Cashier's Check or Inter-tribal purchase document
- 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) 869-4364 or (800) 236-2214

Email: TribalSecretary@oneidanation.org

Mail: Business Committee Support Office
PO Box 365
Oneida WI 54155-0365

In Person: Business Committee Support Office
N7210 Seminary Rd
Oneida WI 54155



Pardon and Forgiveness Application

SECTION 1: APPLICANT INFORMATION

Roll #: _____ Date of Birth: _____ Soc. Sec. #: _____
(IF APPLICABLE)

Name: _____
FIRST MIDDLE LAST MAIDEN

Street Address: _____
STREET APT CITY STATE ZIP

Mailing Address: _____
(if different from above) STREET/PO BOX APT CITY STATE ZIP

Phone: _____ Email: _____

Place of Birth: _____ Driver's License #: _____ State Held: _____

Have you held a license in another state? Yes No If yes, which state: _____

Was your license ever held or revoked? Yes No

If yes, why? _____

SECTION 2: OTHER NAMES List any aliases or previously used names, attach additional pages, if needed.

1. _____ 3. _____
2. _____ 4. _____

SECTION 3: PREVIOUS ADDRESSES List address for the past 10 years (most recent first) attach additional pages, if needed.

1. _____ 3. _____
STREET APT STREET APT
CITY STATE ZIP CITY STATE ZIP
From: _____ To: _____ From: _____ To: _____
MM/YYYY MM/YYYY MM/YYYY MM/YYYY

2. _____ 4. _____
STREET APT STREET APT
CITY STATE ZIP CITY STATE ZIP
From: _____ To: _____ From: _____ To: _____
MM/YYYY MM/YYYY MM/YYYY MM/YYYY

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: _____ Probation/Parole Release Date: _____

4. Convicted of: _____

Conviction Date: _____ Sentence: _____

State of Conviction: _____ Probation/Parole Release Date: _____

SECTION 5: SPECIAL CIRCUMSTANCES – OPTIONAL (List any additional information you would like considered)

SECTION 6: APPLICANT SIGNATURE, ACKNOWLEDGMENT AND RELEASE

- I, the undersigned, under penalty of perjury, depose and say that all information and documentation, provided on and included with this application is true and correct to the best of my knowledge.
- I understand the duties and responsibilities of myself as the applicant and of the Oneida Pardon and Forgiveness Committee, Oneida Business Committee, Oneida Secretary's Office, and other persons involved in the granting or denial of pardons and forgiveness pursuant to Chapter 126 Pardon and Forgiveness law.
- In addition, my signature below authorizes the Pardon and Forgiveness Screening Committee or their designee to complete a background check related to this application.

Signature: _____ Date: _____

(SEAL)

Certificate of Notary Public

Subscribed and sworn to before me this _____ day
of _____, _____

Notary Signature: _____

My commission expires: _____