

# LOYOLA LAW SCHOOL PROJECT FOR THE INNOCENT INQUIRY & CASE QUESTIONNAIRE

# **Instructions for Filling out the Questionnaire**

Please answer the following questions truthfully, completely and with as much detail as possible. If you need additional space to properly answer the question, please attach additional sheets of paper and indicate which question number the additional information is dealing with. Not all questions will apply to your case. If a question does not apply to your case, please say the question does not apply and move on to the next question.

Please do not send any original documents to Loyola Law School Project for the Innocent (LPI).

LPI is unable to consider your case for possible representation until we receive the completed questionnaire, a signed authorization form and the form returned to us at:

Loyola Law School Project for the Innocent 919 Albany Street Los Angeles, CA 90015

\*\*\*NOTE\*\*\* BY FILLING OUT THIS FORM, LOYOLA LAW SCHOOL PROJECT FOR THE INNOCENT IS NOT AGREEING TO REPRESENT YOU. NO ATTORNEY-CLIENT RELATIONSHIP IS CREATED BY THE COMPLETION AND SUBMISSION OF THIS QUESTIONNAIRE.

UNLESS AND UNTIL YOU RECEIVE A LETTER FROM LOYOLA LAW SCHOOL PROJECT FOR THE INNOCENT INDICATING OUR ACCEPTANCE OF YOUR CASE, LOYOLA LAW SCHOOL PROJECT FOR THE INNOCENT SHALL NOT BE CONSIDERED YOUR REPRESENTATIVE.

# YOU ARE NOT AUTHORIZED TO REPRESENT TO ANY COURT OR OFFICIAL THAT LOYOLA LAW SCHOOL PROJECT FOR THE INNOCENT IS REPRESENTING YOU IN THIS MATTER.

If English is not your primary language we will try to assist you through an interpreter, but we cannot guarantee that we will be able to assist.

Due to the number of inquiries LPI receives, we are not able to respond immediately to every request for assistance. LPI makes every effort to acknowledge receipt of all questionnaires and will contact those individuals in need of assistance once we have had an opportunity to assess cases submitted for review.



# **Part I: Basic Information**

1. Name:
2. Inmate Number:
3. Social Security Number:
4. Date of Birth:
5. Current Correctional Facility:
6. Closest Living Relative (include person's name and relationship to you):
7. Do you or someone close to you have any documents that relate to your criminal case? (trial transcripts, appellate documents, police reports, etc.) If so, please list all documents you have in your cell that relate to your criminal conviction. If your documents are not in your possession, provide the person's name who has them, their relationship to you, contact information, and list which documents they have below:
Part II: Conviction & Sentence
8. Superior Court Case Number:
9. Age at time of Arrest:
10. Date of Conviction:
11. County of conviction (jurisdiction):
12. Investigating Agency (e.g., LAPD, Sheriff's Dept., etc.)
13. List all of the crimes charged against you:
14. List all of the crimes for which you were convicted (include the penal code section numbers for each charge):
15. List all of the sentencing enhancements sought against you:
16. What sentence did you receive?



17. If you were sentenced to Life without the possibility of parole, have you filed a discovery motion pursuant to Penal Code Section 1054.9? Yes No If YES, please explain:

18. Were you involved at all in the crime(s) that resulted in your incarceration? Yes No If YES, please explain:

19. Are you claiming to be totally innocent of all the charges against you? Yes No

If **NO**, please explain (which crimes did you commit, etc):

### Part III: Unrelated Charges

21. Please List Prior Convictions (include any juvenile convictions, date of any and all convictions, the jurisdiction, and sentence):

22. Please list any pending charges (include the jurisdiction for each charge):

23. Have you ever been disciplined while in custody? Yes No

If YES, please indicate what you were disciplined for and how many times you were disciplined:

### **Part IV: Attorney Information**

### **Pre-Trial Defense Attorney**

Name: \_\_\_\_\_\_

### Prosecutor

Name: \_\_\_\_\_

### **Trial Defense Attorney**

Name: \_\_\_\_\_



opella	ate Attorney
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ate H	abeas Attorney
ame: _	
dera	Habeas Attorney
ame: _	
	Part V: Individuals with Information about the Crime
	Name:
	Address:
	Telephone Number:
	Your Relationship to the Individual:
	Information they may provide:
	Name:
	Address:
	Telephone Number:
	Your Relationship to the Individual:
	Information they may provide:



Part VI: Case Information
25. Date of the alleged crime:
26. Location of the alleged crime:
27. Names of the alleged victim(s) (including addresses if known):
a)
b)
c)
d)
28. Race(s) of alleged victims:
29. Race of alleged perpetrator (and your race, if different from that of the alleged perpetrator):
30. Name(s) of police officer(s) who investigated the crime:
31. Did you make any statements to the police before or after your arrest, or both? Before After Both
a) Were the statements recorded? Yes No
i) If <b>YES</b> , were they recorded on video or audio?
b) Were the statements written down? Yes No
i) If <b>YES</b> , who wrote the statements?
32. What was the content of your statements?
33. Who identified you as the alleged perpetrator (victim or another witness)?
a) Indicate who provided an identification and what type of identification was given (ex. lineup, show-up, photo identification)
34. Did this person testify at trial? Yes No
35. Did you confess to the crime? Yes No

a) If **YES**, was the confession used at trial? **Yes** No



36. Please provide us with your own statement of facts regarding the crime for which you were convicted (including who, what, where, when, why, how). Please explain why you believe you were wrongfully convicted, if applicable (ex. mistaken identity, false confession, etc.) <u>Please also explain where you were at the time of the crime and whether or not you were in any way involved.</u> Attach additional pages if necessary.



### Part VII: Case in Court

If **YES**, please list the individuals and the results of the cases against each individual. 38. Did your case involve any confidential informants? **Yes No** 39. Did you plead Guilty or Nolo Contendere (No Contest): **Yes No** If **YES**, what type of plea? 40. Was there a written plea agreement? **Yes No** If **YES**, What were the terms of the written agreement?

37. Were other individuals charged in connection with the crime?

41. If you had a trial, did you testify at trial? Yes NoIf NO, why not?

42. Did your trial attorney file any motions with the trial court after you were convicted? Yes No If YES, what motions were filed and what was the ruling made by the court (Ex. Motion for a New Trial, Motion for Resentencing, Motion for an Evidentiary Hearing):

43. Did you appeal the trial court's decision? Yes No

**44. If you have it, please enclose a copy of the appellant's opening brief** (the appellant's opening brief is the first brief filed by your appellate attorney).



45. Which Court of Appeal heard your appeal (which district)?
46. Have you filed a State habeas corpus petition? Yes No
If you replied YES to Question 46, please answer the following questions in the space below:

a) How many habeas corpus petitions have you filed?
b) When was each petition was filed?
c) Was the petition filed by an attorney or did you file the petition yourself (pro per)?
d) In which court did you file each of your habeas petitions?
e) If you filed a petition for a writ of habeas corpus in the Superior Court, which Judge reviewed the petition?
f) What issues were raised in each petition and how did the court(s) rule on each issue?

### **Part VIII: New Evidence**

47. Is there new evidence in your case?	Yes	No
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If YES, what is the new evidence and when was the new evidence discovered?

- 48. If applicable, would you be willing to submit to a DNA test? Yes No
- 49. Is there any other information that you would like to provide us that was not asked about previously in the questionnaire OR anything else you would like us to be aware of?
- 50. Have you contacted any other volunteer/non-profit/student-run organizations to help review your case? Yes No

If **YES**, please list the organizations that you have contacted and provide their contact information.



# **AUTHORIZATION**

# PLEASE READ CAREFULLY BEFORE SIGNING.

I acknowledge that by conducting an initial investigation and reviewing the attached questionnaire, Loyola Law School Project for the Innocent is **NOT** agreeing to work on my case now or in the future. I acknowledge that if my case is chosen by the project to be worked on, the Loyola Law School Project for the Innocent will notify me in writing or in person of their agreement to work on my case. Therefore, submitting the attached questionnaire merely acts as a means for Loyola Law School Project for the Innocent to look into my case and determine whether or not it will accept the case. Additionally, I accept that at any point Loyola Law School Project for the Innocent may determine that either further investigation or work on my particular case is not warranted, and are under no obligation to represent me.

Moreover, by signing below, I authorize Loyola Law School Project for the Innocent to assign one or more law students, working under the immediate supervision of an attorney to investigate my case. This includes, but is not limited to, authorizing correspondence and/or telephone calls to prior counsel, prosecutors, or witnesses. I authorize any and all authorities and persons, including my former attorney(s), investigator(s), and appellate programs that worked on my case, to release all records, files, reports and information of any kind related to me or to any criminal cases involving me including but not limited to police reports, witness statements, post-conviction pleadings, correctional records, presentencing reports, documents in prison social services, legal files, legal papers, court documents, medical records, laboratory analyses, probation reports, attorney files and records, to Loyola Law School Project for the Innocent or any of the project's staff or student representatives. I understand that there may be statutes, rules and regulations that protect the confidentiality of some of the records, files, reports and information covered by this release; it is my specific intent to waive the protection of all such statutes, rules and regulations so that confidential information can be shared with Loyola Law School Project for the Innocent.

Signature	
Nignature	
Signature	

Date \_\_\_\_\_

Name (printed)