



Corrections and Community Supervision

KATHY HOCHUL
Governor

DANIEL F. MARTUSCELLO III
Acting Commissioner

APPLICATION FOR COMMUTATION OF SENTENCE

Complete this application form to request a commutation of sentence from the Governor. A commutation is a reduction in the penalty for a criminal conviction, including a reduction in the length of a prison term. You can find additional information about applying for clemency at <https://www.ny.gov/services/apply-clemency>.

If you need more space to complete any section of this application form, you may attach as many additional pages as you need.

Submit your completed application form by mail to the address below. Please also include copies of any additional documents supporting your application that you would like to provide. For example, this may include copies of certificates of achievement, letters of support, or other materials. Do not send original documents because application materials cannot be returned after they are submitted.

New York State Department of Corrections and Community Supervision
Executive Clemency Bureau
Harriman State Campus – Building 4
1220 Washington Avenue
Albany, NY 12226-2050

The Governor’s Office or the Executive Clemency Bureau may contact you to ask for additional information about your application.

SECTION 1 – APPLICANT INFORMATION

FIRST NAME MIDDLE NAME LAST NAME

DATE OF BIRTH DIN FACILITY

Gender M F X Other:

Are you a United States citizen? YES NO If no, what is your
 citizenship? _____

SECTION 2 – INSTANT OFFENSE

A. Conviction Details

List the convictions for which you are requesting a commutation of sentence. Note that the Governor's Office will also review a complete copy of your criminal history report.

Crime(s) of Conviction	Conviction Date	Sentence

B. Fines or Restitution

Did your sentence(s) include any fines or restitution? YES NO If Yes, how much were you fined or ordered to pay? \$ _____

If Yes, have you paid the fines or restitution in full? YES NO How much, if any, do you still owe? \$ _____

C. Post-Conviction Appeals

Did you appeal your conviction(s)? YES NO If yes, please describe the status of the appeal(s) below. Include case number(s) if you know them.

SECTION 3 – JUSTIFICATION FOR CLEMENCY REQUEST

1. Please describe what happened in the offense that led to your conviction. This should be a factual description of the offense, including your role and involvement.

2. Please provide any details about your life and personal background that you think are important for understanding your conviction(s) and your current request for commutation.

3. Please provide a personal statement describing your life since your conviction. For example, this may include information about your efforts toward self-development, educational achievements, professional accomplishments, involvement in counseling or treatment programs, participation in volunteer organizations, and details about your goals for the future. This section may also include information about any setbacks or conduct violations that have occurred since your conviction, or any special needs or challenges you are facing.

4. Please describe your disciplinary record while incarcerated. Note that the Governor's Office will also review a complete copy of your disciplinary history.

5. Please list your enrollment in any educational programs and any diplomas or other academic achievements you have earned since your conviction.

6. Please list your enrollment in any professional or vocational programs, including any certifications, licenses, or other related achievements you have earned since your conviction.

7. Please list any employment positions you have held since your conviction.

8. Please list all counseling, treatment, or other related programs you have enrolled in or completed since your conviction.

9. Please list your involvement in any community, volunteer, or other similar organizations, programs, or initiatives since your conviction.

10. Please describe your re-entry plan. For example, this may include information about where you would live, who you would live with, employment opportunities that would be available to you, and re-entry organizations that would support you.

11. If there is any additional information you would like to include in your commutation application that has not been covered already, please provide that here .

If you need more space to complete any of the above sections of this application form, you may attach as many additional pages as you need and include them when you submit your application.

Please also remember that you may submit copies of any additional documents supporting your application that you would like to provide. For example, this may include copies of certificates of achievement, letters of support, or other materials. Do not send original documents because application materials cannot be returned after they are submitted.

SECTION 4 – APPLICANT DECLARATION

I, _____, declare under penalty of perjury under the law of the
(Print Applicant's Full Name)

State of New York that the information I have provided in this application form is true and correct.

Signature of Applicant

Date