

Restoration of Rights

Violent Offenders / Drug Offenders / Election Law Offenders Application Instructions

PLEASE READ CAREFULLY:

Persons who have been convicted of a *violent offense*, a *drug manufacturing or distribution offense* or an *election law offense* must use this form to apply for restoration of rights.

Current policy states that in order to be eligible for the restoration of rights by Governor Timothy M. Kaine, an applicant must be free from supervised probation and not have any convictions or charges pending for a period of five years immediately preceding the application. No application is considered if there is a charge of Driving While Intoxicated for a period of five years immediately preceding the application.

To apply for restoration of rights, you must:

- Be a resident of Virginia, or
- Have been convicted of a felony in a Virginia court, a U.S. District Court, or a military court,
- Have paid all costs, fines, and/or restitution associated with your convictions, and
- Not have a conviction for DWI within the past five (5) years immediately preceding the application.

The Secretary of the Commonwealth will conduct a criminal history check on all applicants.

The civil rights restored through this process include the rights to:

- ✓ Register to vote
- ✓ Hold public office
- ✓ Serve on a jury
- ✓ Serve as a notary public.

The restoration of rights does not restore the right to possess a firearm.

The restoration of rights does not expunge a criminal conviction.

This is not a pardon. A person who has been convicted of a felony must first have his or her rights restored in order to be considered for a pardon.

The Governor has sole discretion to restore civil rights. There is no process for appealing his decision. Only complete and accurate applications will be considered and incorrect or misleading information may result in the denial of the application. A person who has been denied may not reapply for two years.

This packet contains the necessary forms to petition the Governor for the restoration of your rights. Please read all information and instructions carefully.

If you think you are eligible to have your rights restored, complete all the forms, assemble the documents, and return them to this office. There are no costs or fees required of you as a petitioner.

If have questions about your eligibility, contact:

Restoration of Rights
Secretary of the Commonwealth
P. O. Box 2454
Richmond, VA 23218

Phone (804) 692-2531

THE SECRETARY OF THE COMMONWEALTH WILL NOT ACCEPT INCOMPLETE APPLICATIONS

QUESTIONS AND ANSWERS ABOUT RESTORATION OF CIVIL RIGHTS

HOW DO I KNOW IF I HAVE LOST MY CIVIL RIGHTS?

You have lost your civil rights if you have ever been convicted of a felony in:

- Any Virginia court;
- Any court of any other state or the District of Columbia;
- Any federal court;
- Any court of an associated commonwealth, territory, or possession of the United States.

You have not lost your civil rights if you have only been convicted of a misdemeanor or misdemeanors.

HOW DO I KNOW IF A CONVICTON WAS A FELONY?

Request a copy of your sentencing order from the clerk of the circuit court in which you were convicted. The sentencing order will state the charge for which you were convicted, the sentencing date, and the original sentence information

HOW DO I KNOW IF I AM ELIGIBLE TO HAVE MY RIGHTS RESTORED?

You are eligible if you:

- Have completed all prison or jail terms;
- Are not under probation or parole supervision;
- Have no pending charges in any locality;
- Have paid all fines, restitution, and/or court costs for any convictions; and
- Have been free of any parole or supervised probation for the last five years.

If you do not know the status of fines, restitution, or court costs, you will need to consult the clerk of the court in which you were convicted.

WHAT IF I STILL OWE COURT COSTS?

If you are still under an order to pay court costs, fines, or restitution as a condition of your sentence, you may not have your rights restored. You must show proof of payment of all court costs, fines, or restitution before being eligible to apply for restoration of your civil rights.

WHAT IS THE DIFFERENCE BETWEEN A RESTORATION OF RIGHTS AND A PARDON?

Restoration of civil rights, if granted, will fully restore citizenship. It removes all civil disabilities and disqualifications imposed as a result of a felony conviction. These rights include the right to vote, to run for and hold public office, to serve on juries, and to serve as a Notary Public. A restoration of rights allows you to apply for a pardon.

A pardon is an act of official forgiveness and is granted only in exceptional cases. It often serves as a means for the petitioner to advance in employment, education, and self-esteem.

WILL THE RESTORATION OF MY CIVIL RIGHTS RESTORE MY RIGHTS TO POSSESS OR TRANSPORT ANY FIREARM OR TO CARRY A CONCEALED WEAPON?

No. A person convicted of a felony under the laws of Virginia, or any other state or under federal law may not possess or transport any firearm, or carry a concealed weapon (defined to include both handguns and long guns).

To regain **state** firearms privileges, a convicted felon may apply to the circuit court of his residence for a permit to possess or carry a firearm. The court “in its discretion and for good cause shown” may grant the petition. If your conviction, however, was for a federal offense, you may only seek restoration of your firearms privileges through the federal system.

While the Governor has the authority to restore state firearms privileges expressly by a pardon or through restoration of political rights, he does not customarily do so.

INSTRUCTIONS

APPLICATION for RESTORATION of CIVIL RIGHTS

Item A: Print your full name, as you are **now** known. If you have ever changed your name, see instructions for Item B.

Item B: If you have ever had your name legally changed **since** the time of a prior conviction, print the name under which you were convicted. Also, if you were ever convicted under an alias, print the alias name on this line.

Item C: Print your date of birth and Social Security Number.

Item D: If you were an inmate in the Virginia Department of Corrections, print your prison number on this line. If you were an inmate in any other system, print the name of the state or other authority beside the number.

Item E: Print your **present** home address street number or post office box.

Item F: Print the city and state where you reside.

Item G: Print your mailing address if different from above.

Item H: Print your **present** home and work telephone numbers, including the area codes.

Item I: Print the name of your present employer.

Item J: Print your employer's address.

Obtain a letter from your most recent probation or parole officer outlining your period of supervision. This letter should be addressed to the Governor, c/o Secretary of the Commonwealth, and mailed with your application. If your officer has retired or no longer working in the probation office, call the probation office that you reported to and explain to them that you are applying to have your rights restored. They will know what type of letter to send to this office. **A copy of your pre-sentence or post-sentence report, if available, should accompany your application.** This can be submitted from your probation /parole officer or from the court in which you were convicted. If there is no pre-sentencing or post-sentencing report, you must obtain a letter on the court's or probation office letterhead indicating it is not available.

It is very important that you list **each** felony conviction on your record. **Your application will be rejected if this information is not complete.**

If you do not have this information, you may obtain it from your probation parole officer or the Clerk of the Court in which you were convicted.

If you cannot list all convictions on the application, put the remainder on separate sheet of paper and attach this to the application.

Your application cannot be processed until you have furnished **certified** copies of every order of conviction in your record. These may be obtained from the Clerk of the Court in which you were convicted.

Attach **certified** copies of every sentencing order obtained from your probation/parole officer or from the Court in which you were convicted. NOTE: Your order of conviction and sentencing order may be the same document.

If you have ever had a sentence terminated by any court, or if you have ever had your parole or probation terminated, you should obtain **certified** copies of any court order or other official document modifying that term. Print the number of documents of this type on the line.

IF YOUR ANSWER TO THE QUESTION IN LINE 10 IS “NO,” YOU ARE NOT ELIGIBLE TO APPLY AT THIS TIME.

LETTER OF PETITION

Read and sign the letter of petition. Be sure to put the date on the proper line.

LETTERS OF REFERENCE

Take the three (3) letters of reference to three (3) reputable people who live in your home community. Be certain these are people who know you well enough to certify your good character. Good people to ask for references might be:

- Your employer or job supervisor;
- A local businesswoman or businessman;
- Your minister, priest, rabbi, or other spiritual advisor;
- A leader of a local civic group;
- A state or local public official; or
- A law enforcement officer.

Have each person answer the questions in the letter and sign and date it at the bottom.

Ask each person to return the letter to you. **You must return the three (3) letters with your application.**

NOTE: Family member or in-laws may NOT sign these letters of reference. It is not necessary to explain the purpose of the letter of reference to the people who sign it, but they may wish to know. The decision to tell them is up to you.

PERSONAL LETTER (DETAILS OF OFFENSE LETTER)

Please provide the Governor with a personal account of the circumstances surrounding your conviction(s), how your life has changed since then, if you are involved in any community activities, and, why, in particular, you feel your rights should be restored.

APPLICANTS PETITIONING OUTSIDE OF THE COMMONWEALTH OF VIRGINIA

Please provide the Governor with the following documents:

- A certified copy of your Driving Record from the state you reside
- A certified copy of your Criminal Record from the state you reside

If there is no record of a criminal record, please submit certified documentation stating this claim.

Mail your application to:

Restoration of Rights
Secretary of the Commonwealth
P. O. Box 2454
Richmond, VA 23218

Make certain you have included the following:

- ✓
- The application, completely filled out, signed and notarized;
- Certified copies of all felony court orders and sentencing reports;
- Certified proof of payment for any fines, restitution and/or court cost;
- The letter of petition, signed and dated;
- Three letters of reference, completed, signed and dated by three (3) Reputable citizens;
- A current letter from your most recent probation/parole officer, Addressed to the Governor, outlining your period of supervision;
- A copy of your pre-sentence or post-sentence report (This needs to be Forwarded to this office by your probation or parole officer.); and
- A personal letter to the Governor (Details of Offense Letter);
- Certified copy of your Driving and Criminal Record from the state you reside (Only for out-of-state applicants).

Restoration of Rights

Violent Offenders / Drug Offenders / Election Law Offenders Application

Before filling out this application, be sure to read the instructions thoroughly and print or type the complete information in each blank. If a question does not apply, put "N/A" in the blank. Attach certified copies of all required documents to this application. The affidavit on the reverse side must be signed in the presence of a notary public or other official empowered to administer oaths.

A. Name as Known Now (Please Print): _____

B. Name as Convicted (Please Print): _____

C. Date of Birth: _____ Social Security Number: _____

D. Prison Number (if any): _____

E. Home Address: _____

F. City and State: _____

G. Mailing Address: _____

H. Home Phone: _____ Work Phone: _____

I. Present Employer: _____

J. Employer's Address: _____

Offense(s): _____

Court: _____ County/State: _____

Date of Conviction: _____ Date of Sentence: _____

Date of Release from Supervised Probation: _____

Original sentence as written in the conviction/sentence order on the date of sentencing:

NOTE: If you have more than one (1) conviction, provide the same information about each conviction on a separate sheet, and attach the sheet to this application. Check here if you have more than one felony conviction. ____

1. If you were on supervised probation or parole, obtain a letter from the District Probation and Parole Office outlining your period of supervision. If a presentence report was prepared, ask them to send a copy directly to this office.

2. Attach a certified copy of the conviction order for each felony conviction. ____
3. Attach a certified copy of the sentencing order for each felony conviction. ____
4. Attach a certified copy of each order that modifies or changes the sentencing order for each felony conviction. This includes any order reducing or terminatng any sentence, suspended sentence, or any term of probation. ____
5. Attach a Details of Offense Letter addressed to Governor Timothy M. Kaine. ____
6. Attach a copy of the order from the Virginia Parole Board, or a letter from the Parole Office, terminating your parole period. ____
7. Have you ever had your rights restored for any criminal conviction in Virginia or any other state? ____YES
(Attach document) ____NO
8. Have you ever had been granted a pardon for any criminal conviction in Virginia or any other state?
____YES (Attach document) ____NO
9. Attach certified receipt of proof of payment of any fines, court costs, or restitution. ____
10. Have you been free of any sentence, suspended sentence, probation or parole, or supervised release for a minimum of five (5) years? ____YES ____NO

Instructions: This affidavit must be ***signed in the presence of a notary public*** or other official empowered to administer an oath.

AFFIDAVIT

I, the undersigned, do solemnly swear (or affirm) that the information on this application, including all attachments, is complete, accurate, and true.

Signature of Applicant

Commonwealth of Virginia
City/County of _____

Subscribed and sworn before me this _____ day of _____ year _____.

Notary Public

My Commission Expires: _____

Mail this application and all required documentation to:

Restoration of Rights
Secretary of the Commonwealth
P.O. Box 2454, Richmond, VA 23218

LETTER OF PETITION

Governor of Virginia
c/o Secretary of the Commonwealth
Post Office Box 2454
Richmond, VA 23218

Date: _____

Dear Governor:

I am enclosing my application for the restoration of my civil rights. I believe that the information contained herein is complete and accurate. I understand that an incomplete application will not be accepted and will be returned to me.

I have attached certified copies of all orders of conviction and sentencing pertaining to my felony conviction(s), as well as all other required documents. In addition, I am submitting three letters of reference from reputable citizens who can attest to my character and reputation in the community.

I believe that my application will prove that I have earned the privilege to have my civil rights restored. I understand that the decision to restore my rights is vested solely in the office of the Governor of Virginia.

Thank you for your consideration.

Respectfully yours,

Signature

Address

City, State, Zip code

Letter of Reference

Print Name

Occupation or Title

Address

City, State, Zip code

Governor of Virginia
c/o Secretary of the Commonwealth
Post Office Box 2454
Richmond, VA 23218

Dear Governor:

I am writing at the request of _____

whom I have known personally for _____ years. I am not a relative by birth or by marriage, and I believe that he/she is a law abiding citizen of good character. My relationship with the applicant is

_____,
and I am enclosing additional comments below:

I hope this information will be helpful to you.

Respectfully,

Signature of Reference

Letter of Reference

Print Name

Occupation or Title

Address

City, State, Zip code

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c/o Secretary of the Commonwealth
Post Office Box 2454
Richmond, VA 23218

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