

**CIU SUBMISSION FORM
&
REQUEST FOR REVIEW**

NAME: _____

INMATE NUMBER: _____ DATE OF BIRTH: _____

CURRENT ADDRESS: _____

COUNTY OF CONVICTION(S): _____

DATE OF CONVICTION(S): _____

CASE NUMBER OF CONVICTION(S) YOU WOULD LIKE REVIEWED: _____

Please return this submission to:
OFFICE OF THE WYANDOTTE COUNTY DISTRICT ATTORNEY
COMMUNITY INTEGRITY UNIT
710 N. 7TH STREET, SUITE 10
KANSAS CITY, KANSAS 66101-3051

Please complete this submission form as fully as possible.
If you do not know the answer to a question, you may leave it blank.

WARNING: THE DISTRICT ATTORNEY’S OFFICE’S CANNOT PROVIDE YOU WITH INFORMATION AS TO WHEN THE REVIEW OF THIS SUBMISSION WILL BE COMPLETED. DUE TO THE VOLUME OF REQUESTS, IT WILL BE SOME TIME BEFORE WE CAN REVIEW YOUR SUBMISSION.

PLEASE READ THE CONSENT FORM CAREFULLY

The prosecutors in the CIU at the District Attorney’s Office do not represent you and cannot offer you legal advice. A prosecutor cannot legally or ethically be your attorney.

The CIU’s investigation and any decisions made by the District Attorney are based on an independent assessment of the facts and the law. Accordingly, your choice of counsel, media coverage of your case, or political influence from any source will play no role in the CIU’s consideration. There is no need to contact the CIU for updates; the CIU will contact you once your submission is reviewed.

CONSENT FORM

The petitioner must agree to all of the following and indicate such agreement by initialing to the right of each statement.	
	INITIALS OF PETITIONER
1. I certify that all of the statements in this submission are true and accurate.	1.
2. I acknowledge that providing false information will result in a declination of my submission to the Conviction Integrity Unit (“CIU”).	2.
3. I understand that I have no right to a CIU review, and that there is no right of appeal from declination by the CIU.	3.
4. I understand that the CIU is not my attorney.	4.
5. I believe that credible evidence of my innocence or wrongful conviction exists.	5.
6. I am requesting that CIU review my claim of actual innocence or wrongful conviction.	6.
7. I am willing to cooperate with the CIU’s investigation.	7.
8. I understand the CIU may determine that my case does not meet their criteria and at any point decline my submission.	8.
9. I understand that my request for the CIU to review my case is not an appeal.	9.
10. I understand that sending this submission to the CIU WILL NOT extend any court’s legal deadlines including the statute of limitation for filing a federal habeas petition.	10.

I have read and understand all of the above statements. By initialing the statements and signing below, I understand and agree to comply with any terms herein. No one has told me to agree to anything that I oppose or do not understand. My agreements are of my own free will and are given voluntarily.

DATE: _____

NAME (PRINT): _____

SIGNATURE: _____

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1. Do you have a lawyer? If so, please provide your lawyer's name, address and phone number:

2. What is your first language?

3. What is the highest grade you completed in school? _____

4. Is there any reason that corresponding in writing will be difficult for you?

Yes _____ or No _____

If yes, please explain.

5. Have you ever received mental health treatment?

Yes _____ or No _____

If yes, please describe if it is relevant to your ability to complete this form.

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6. Is anyone assisting you in completing this form?

Yes _____ or No _____

If yes, please identify that person and explain why.

7. Please provide the names, addresses, and phone numbers of family or friends who might have information regarding your case. *By writing these names, you are giving us permission to talk to them about your case.*

8. Are you claiming **actual innocence**? Actual innocence means that you were not involved in the crime ANY way (e.g., self-defense or insanity are not an actual innocence claims).

Yes _____ or No _____

If yes, please describe why you are actually innocent of the crime for which you were convicted (feel free to include additional sheets of paper):

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9. Are you claiming that you were wrongfully convicted, but not actually innocent? “Wrongfully convicted” means that you may have had some involvement in the crime, but the evidence used against you at trial was inaccurate or unreliable or your trial was fundamentally unfair.

Yes _____ or No _____

If yes, please describe why you were wrongfully of the crime (feel free to include additional sheets of paper):

10. Are you asking for DNA, fingerprint, or other forensic testing of evidence from the crime?

Yes _____ or No _____ or Do Not Know _____

If yes, please identify what you would like tested and why the results would show you are actually innocent or wrongfully convicted.

11. Did you have any co-defendants?

Yes _____ or No _____

If yes, please identify them by name and give any contact information:

Were your co-defendants actually innocent or wrongfully convicted?

Yes _____ or No _____

If yes, please explain why.

If no, please explain why you are actually innocent or wrongfully convicted and they are not.

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12. Were there any other people involved in the commission of the crime who were not prosecuted or convicted (e.g. accomplices or alternative suspects)?

Yes ___ or No _____

If yes, please identify them by name and give any contact information:

Please explain their role in the crime and why they were not prosecuted or convicted.

13. Please identify any witnesses who know information relevant to your claim of actual innocence or wrongful conviction.

Witness # 1:

Name: _____

Address and Phone Number (if available):

What information does this person have?

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Witness # 2:

Name: _____

Address and Phone Number (if available):

What information does this person have?

Witness # 3:

Name: _____

Address and Phone Number (if available):

What information does this person have?

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14. Was any scientific or forensic evidence or other expert testimony (e.g., DNA, fingerprints, ballistics, hair and fiber comparison, medical opinions) used to convict you?

Yes ___ or No _____

If yes, please describe this scientific or forensic evidence or other expert testimony:

15. Did any police informants or “snitches” testify against you at your trial?

Yes ___ or No _____

If yes, please list their names and what they said.

Was their testimony truthful? If not, please explain why.

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16. Did you confess to the crime for which you were convicted?

Yes ___ or No ____

If yes, please explain why you confessed.

17. Did an eyewitness identify you at your trial as the person who committed the crime?

Yes ___ or No _____

If yes, was the identification wrong?

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18. Do you know who committed the crime(s) of which you were convicted?

Yes ___ or No ____

If yes, please name them below and provide that person's whereabouts (if known).

19. How do you know that this person committed the crime?

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20. Please tell us anything else you would like us to know that could help prove your actual innocence or that you were wrongfully convicted.

I affirm that I have been truthful in answering the questions in this form.

Signed: _____

Date: _____

Please print and email the completed form to DACIU@wycokck.org or mail to the address listed on page 1 of the Submission form.