

EARL CARL INSTITUTE FOR LEGAL AND SOCIAL POLICY, INC.
TEXAS SOUTHERN UNIVERSITY
T.S.U. Box #1156
THURGOOD MARSHALL SCHOOL OF LAW
3100 Cleburne Street - Houston, Texas 77004
Phone: (713) 313-1139 - Fax: (713) 313-1153

INNOCENCE PROJECT QUESTIONNAIRE

The following questions are designed to help us decide whether we can assist you in proving your innocence. Our office only reviews cases for a claim of actual innocence. We do not provide general legal advice or assistance with writs of habeas corpus on grounds other than innocence. We will not be able to assist you unless we can locate new evidence that was either not available, or was overlooked by you or your attorney at the time of trial.

This questionnaire must be completed with as much information as possible. If you do not know the answer to a question, please say you do not know. We will not continue screening your case without a completed questionnaire. Please do not send us transcripts or other documents with the questionnaire. We will request them from you if needed. You may attach additional pages to explain your case if necessary.

We are not your lawyers and have no attorney-client relationship with you at this time. However, the information you provide to us on this questionnaire is given in an effort by you to establish an attorney-client relationship with us. As such, that information is confidential and is protected in law by the attorney-client privilege. That is true whether or not an attorney-client relationship is ever formed between you and us.

I. PERSONAL INFORMATION

1. Your full name (first, middle, last): _____

2. Date of birth: _____

3. Current mailing address (include ID number):

4. Closest relative or personal friend for contact outside of prison (*name, address, phone #*):

5. Are you currently represented by an attorney or another innocence project? Yes No

2. Describe any other new evidence that you believe is available or can be developed to prove your innocence, and explain why it was not presented previously.

IV. LAW ENFORCEMENT INVESTIGATION/EVIDENCE

1. List the law enforcement agency that investigated the crime and the names of the investigating officers:

2. How did you become a suspect in the investigation?

3. Did you give a confession or make statements to investigating officers? Yes No

If "Yes",

- A. Please give a detailed description of what you told officers:

B. Why did you give the statement?

4. Please list the name(s) of all co-defendants (others who were charged with the same crime) or other suspects investigated for this crime:

5. Please list the name(s) of all alleged victims of the offense for which you were convicted:

6. Please list the names of any witnesses to the crime for which you were convicted:

V. COURT PROCEEDINGS

1. Did you: **(circle one)** Plead Guilty Go to Trial

If you entered a plea (guilty, no contest, or other type), please explain why:

2. Name, address and phone number of trial lawyer:

8. Direct Appeal

- a. Did you appeal? **(circle one)** Yes No
- b. Is your case currently being litigated on direct appeal (this includes petition for discretionary review (PDR))? **(circle one)** Yes No
- c. Name, address and phone number of appellate lawyer:

- d. Did you or your attorney file a petition for discretionary review (PDR)? Yes No
- e. Did you or your attorney file a writ of certiorari to the U.S. Supreme Court? Yes No

9. Writ of Habeas Corpus

- a. Have you or an attorney filed a writ of habeas corpus in STATE court? Yes No

If yes, how many writs have you filed? _____

Name, address and phone number of writ lawyer:

For each writ you have filed, list the issues that you raised in the writ and the court's decision on the writ:

- b. Have you or an attorney filed a writ of habeas corpus in FEDERAL court? Yes No

If yes, how many writs have you filed? _____

Name, address and phone number of writ lawyer:

For each writ you have filed, list the issues that you raised in the writ and the court's decision on the writ:

V. CHILD SEXUAL ABUSE CASES (*If you are not convicted of child sexual abuse, skip these questions.*)

1. How many children accused you of molesting them? _____
2. For each child, list the child's name, age at time of abuse, how old the child would be now, gender and the child's relationship to you. (*For example, daughter, son, step-child, niece, nephew, neighbor, etc.*)

Child 1. _____

Child 2. _____

Child 3. _____

3. What did the child/children say that you did?

4. When did the child/children first make the accusation and whom did they tell?

5. Why do you think the child/children made complaints against you?

6. Did a doctor examine the child/children? Yes No
If "Yes", was any biological evidence collected?
Describe the results/findings of the exam and any evidence collected:

7. Has the child/children told anyone that they lied or made up the accusation? Yes No
If "Yes", what did they say and whom did they tell?

VI. CASE MATERIALS (*Please just check the materials that are available to you. DO NOT SEND US ANY OF THE MATERIALS unless requested.*)

YES/NO

- | | | |
|----|--|-------|
| 1. | Hearing transcripts? | _____ |
| 2. | Pretrial transcripts? | _____ |
| 3. | Trial transcripts? | _____ |
| 4. | Police offense reports? | _____ |
| 5. | Police field notes? (<i>Handwritten notes</i>) | _____ |
| 6. | Laboratory reports? | _____ |
| 7. | Appellate briefs? | |
| | A. State's brief? | _____ |
| | B. Your brief? | _____ |
| | C. Any other briefs? (Specify) | _____ |
| 8. | Post-conviction writs | _____ |
| 9. | DNA motions? | _____ |
| 9. | Any other briefs or legal memorandums of any kind?
Please describe: | _____ |

VI. ANY OTHER INFORMATION YOU THINK WE SHOULD KNOW ABOUT YOU OR YOUR CASE.

NOTE: Please return this form within 90 days. If it is not returned within 90 days, we will assume you do not want your case reviewed for a claim of innocence and close your file without further notice.