

Cuyahoga County Prosecutor's Office Conviction Integrity Unit
LIMITED WAIVER AND CONSENT

STATE OF OHIO		▶ Case No. _____
Cuyahoga County		Common Pleas Court
STATE OF OHIO		
vs.		
Name of Applicant:		
DOB:	Age	Highest Level of Education Completed
Convicted Offense(s):		
Date of Offense(s):		Date of Conviction
<p>The Applicant must review the completed waiver and consent form before signing. This form must also be notarized.</p> <p>The Applicant must place his/her initials to the right of each statement/terms if he/she agrees with the statement/terms and agrees to comply with the terms/statement therein.</p> <p>The Conviction Integrity Unit of the Cuyahoga County Prosecutor's Office shall also be referred to as "CIU" throughout this document and during the review process.</p>		
WAIVER OF PROCEDURAL SAFEGUARDS AND PRIVILEGES AND CONSENT TO INQUIRY		Initials of Convicted Offender
1. I acknowledge that I have been convicted of the offense(s) noted above by the State of Ohio.		(1) _____
2. I believe that credible evidence of innocence exist.		(2) _____
3. I am requesting that the CIU review my claim of actual innocence.		(3) _____
4. I consent to a formal inquiry of my case by the Conviction Integrity Unit.		(4) _____
5. I agree to fully cooperate with the Conviction Integrity Unit's review.		(5) _____
6. I agree to provide full disclosure regarding all inquiries made by the Conviction Integrity Unit.		(6) _____
7. I understand that if I refuse to cooperate in any way or become uncooperative with the Conviction Integrity Unit's review process, the review may be cancelled.		(7) _____

<p>8. I understand that the Conviction Integrity Unit may determine that my case does not meet its criteria and at any point reject my claim.</p>	(8) _____
<p>9. I understand that I have no right to appeal a rejection of my claim by the Conviction Integrity Unit.</p>	(9) _____
<p>10. I understand, as it relates ONLY to my pending application and the associated case being reviewed by the CIU, I am waiving of my right against self-incrimination pursuant to the Fifth Amendment of the United States Constitution and Article I, Section 10 of the Ohio Constitution.</p>	(10) _____
<p>11. I understand that the Conviction Integrity Unit may provide disclosure to the appropriate authorities of the following:</p>	
<p>(a) Evidence uncovered by the Conviction Integrity Unit that tends to show that other people may have been involved in the commission of the crime(s) for which I was convicted.</p>	(11a) _____
<p>(b) Evidence that others committed criminal acts or other wrongdoings will be referred to the appropriate law enforcement authorities.</p>	(11b) _____
<p>12. I also understand that evidence uncovered by the Conviction Integrity Unit that is favorable to me shall be disclosed to me or my legal representative regardless of the outcome of the review.</p>	(12) _____
<p>13. I understand that I am waiving my attorney-client privilege for any attorney who has represented me in the past on this case, or who is presently representing me in connection with this application under the CIU. I fully understand that this waiver and consent include the ability for the CIU to speak with me directly as well as to speak with both my past and present attorneys and for the CIU to receive and review a copy of my attorney files related to the case being reviewed by the CIU under this application.</p>	(13) _____

ACKNOWLEDGEMENT BY CONVICTED OFFENDER

I have fully read, or had read to me, this limited Waiver and I completely understand all of the above terms and statements. By initialing the statements/terms and signing below, I acknowledge that I am doing so knowingly, intelligently, and of my own free will, and I also acknowledge that I agree and understand all the terms and statements herein. I also acknowledge that by signing below and initialing the terms and statements herein, I am not being forced or compelled, by any representative of the CIU or any other person including my present or past attorneys. I am voluntarily and knowingly signing below and have voluntarily initialed all the statements and terms herein, and I have done so without any promise or any guarantee being made to me by the CIU or anyone else regarding my case or the outcome of the CIU's review of my case.

Date:

Signature of Applicant:

Name of Applicant (Type or Print):

CERTIFICATION BY ATTORNEY FOR CONVICTED PERSON (if represented by counsel)

I hereby certify and attest that I have fully read, fully explained, and fully reviewed this Waiver and Consent Form to and with the Applicant. I certify and attest that the Applicant has reviewed each statement and term and that his/her initials herein and signature are results of Applicant's independent review and understanding. I acknowledge that Applicant's review and execution of this Waiver and Consent Form were made in my presence and with my legal assistance and legal advice. I further certify and attest that the Applicant was in my presence as he/she provided his/her initials to the terms/statements as well as during the Applicant's signature to this Waiver and Consent Form and that the signature and initials herein are indeed that of the Applicant.

Date:

Signature of the Attorney for Applicant:

Name of Attorney for Applicant (Type or Print):

SWORN AND SUBSCRIBED BEFORE ME

Date:

Signature of Notary:

Name of Notary:

Notary Commission Expires:

The original copy of this form must be delivered to the Conviction Integrity Unit. Please retain a copy for your records.