



SHAREN WILSON
CRIMINAL DISTRICT ATTORNEY
TARRANT COUNTY, TEXAS

CONVICTION INTEGRITY UNIT REVIEW REQUEST

INSTRUCTIONS

Answer the following application as completely as possible and provide copies of any supporting documents. **Do not send originals or the only copy; be advised that submissions will not be returned upon completion of the review.** Use additional paper if necessary but indicate the section and the question. Due to the nature of the review process and the volume of requests, the Conviction Integrity Unit (CIU) is unable to provide a specific timeframe for the progression or the completion of a review. Once the review is complete, the CIU will inform the convicted person of its conclusions.

ELIGIBILITY CRITERIA

CIU will accept review requests that meet the following criteria:

- The conviction must arise from a Tarrant County criminal court.
- The conviction must be final and not have any pending post-conviction activity.
- Claims must assert actual innocence that the convicted person did not commit the crime or participate in any way. Claims of self-defense, consent, or lack of intent are declined.
- Claims must be based on new information or evidence that has not been presented and argued previously before the trial court or in post-conviction remedies.
- Claims must be capable of being investigated and resolved so that, if substantiated, it would bear directly on the issue of applicant's innocence.
- The records and/or evidence necessary for the re-investigation must be available to review.
- CIU does not review: claims alleging ineffective assistance of counsel or errors in trial procedure, including indictment, jury selection or sentencing; questions of law; mere assertions or speculation of wrongdoing; or requests for time cuts or sentence reductions.

ADVICE OF RIGHTS

Be advised that CIU does not represent the convicted person. We are unable to give legal advice, and the attorney-client privilege does not apply to our communications. If the convicted person is on probation and a revocation petition is filed, any CIU review will cease and any provided information might also be disclosed to the State and the defense counsel involved in the revocation proceedings.

Return the fully completed form and copies of any related documents by mail to:

Tarrant County Criminal District Attorney's Office
Tim Curry Criminal Justice Center
401 W. Belknap Fort Worth, TX 76196
Attention: Conviction Integrity Unit

SECTION I | GENERAL INFORMATION

Convicted Person's Name: _____

Maiden Name, if applicable: _____ Date of Birth: ____/____/____

TDCJ ID Number: _____ Primary Language: _____

Current mailing address:

Street City State Zip

Is the convicted person currently incarcerated?

Yes No, on probation No, on parole No, sentence discharged

Case Number(s): _____ Court Number: _____

Offense(s) of Conviction: _____

Date of Offense(s): _____

City/Location of Offense(s): _____

Date of Conviction: ____/____/____ Sentence(s): _____

How was the case resolved?

Trial By Jury Bench/Judge Trial Guilty Plea No Contest Plea

Was a plea bargain offered? Yes No

What was the offer? _____

Did you accept it or reject it? Accepted
 Rejected
 Countered with _____

What was your reasoning? _____

What was the name of your attorney at trial? _____

If you are **currently represented** by an attorney, please provide the attorney's name and contact information: _____

SECTION II | CASE INFORMATION

VICTIM INFORMATION

Name and Age of Victim(s): _____

Did you know or are you related to the victim(s)? Yes No

If so, please explain: _____

INVESTIGATION INFORMATION

Why did you think you became a suspect in the case? _____

Describe your arrest – where you were, when and how it happened, who you were with, etc.: _____

Did you give a statement to the police, and if so, how was it documented?

- Verbal Statement Given Verbal Statement Recorded No Statement Given
 Written Statement Given Written Statement Recorded

Do you know if any other suspect was investigated in this case? If so, please list their names and any known contact information: _____

How did you learn about this other suspect? _____

If you have copies of documents given to you by your trial attorney, such as police reports, medical records, affidavits, etc., list below what you possess **but do not send them unless asked for them.**

TRIAL INFORMATION

List the names of all witnesses who testified for the prosecution at your trial: _____

Did anyone testify that you confessed to or admitted involvement in the crime? Yes No

If yes, please explain: _____

If you testified, list the dates of ***all*** testimony, the type of trial or hearing, and the part of that proceeding (e.g., criminal trial - guilt/innocence phase; criminal trial - punishment phase; a civil deposition; hearing on a child custody/support, etc.): _____

Please describe the defensive theory that you or your attorney presented at trial: _____

Who testified for the defense at trial? _____

What defensive exhibits were admitted into the record during trial? _____

Did the prosecution use any of the following against you to convict you?

- bitemark analysis
- microscopic hair comparison
- arson science
- gunshot residue (GSR)
- fingerprints
- blood typing (AB, O, etc.)
- microscopic fiber or carpet analysis
- bullet/ballistic comparison
- DNA
- jailhouse informant
- Shaken-Baby Syndrome

Please explain: _____

SECTION III | POST-CONVICTION ACTIVITY

DIRECT APPEAL

Appellate Cause No.: _____ Date Filed: ___/___/____ Attorney: _____

What claims did you raise? _____

What was the outcome and date of your appeal? _____ Date: ___/___/____

Affirmed Reversed & Remanded Pending Not Filed Other: _____

If you did not file, why not? _____

PETITION FOR DISCRETIONARY REVIEW

Appellate Cause No.: _____ Date Filed: ___/___/____ Attorney: _____

What claims did you raise? _____

What was the outcome and date of your PDR? _____ Date: ___/___/____

Refused Dismissed Pending Not Filed Other: _____

If you did not file, why not? _____

WRIT OF HABEAS CORPUS

Writ Cause No.: _____ Date Filed: ___/___/____ Attorney: _____

What claims did you raise? _____

What was the outcome and date of your writ? _____ Date: ___/___/____

Refused Dismissed Pending Not Filed Other: _____

If you did not file, why not? _____

CH. 64 - REQUEST FOR DNA TESTING

If you filed a motion, who was your attorney? _____ Date Filed: ___/___/____

What claims did you raise? _____

What was the outcome and date of your motion? _____ Date: ___/___/____

Denied Granted Pending Not Filed Other: _____

If you did not file a motion, why not? _____

Did you appeal any of the trial court's rulings? Yes No

What was the date and outcome of that appeal? _____ Date: ___/___/____

Affirmed Reversed & Remanded Other: _____

If testing was done, what is your understanding of the results? _____

If you did not appeal, why not? _____

SECTION IV | CLAIMS IN YOUR REVIEW

What is the basis for your integrity review? (check all that apply and then explain in detail below.)

- Actual innocence, **and ...**
- I have newly discovered evidence.
- A witness/informant has recanted or changed their testimony.
- I have an alibi.
- DNA material/evidence in my case was not tested.
- There is an issue with the scientific evidence or expert witness.
- A police officer in my case has been arrested or fired.
- Evidence or *Brady* information was withheld.
- Other: _____

ACTUAL INNOCENCE

Actual Innocence means that you did not commit the offense at all or participate in it in any way.

Explain in detail, as defined, how you are actually innocent of the offense: _____

NEWLY DISCOVERED EVIDENCE

New Evidence is evidence that was either not known to you at the time of the trial or plea or could not be known to you with the exercise of due diligence at the time of plea, trial, or post-trial motions.

What new evidence, as defined, has been discovered in your case? _____

How did you come to learn of this evidence? _____

Why was this evidence not available at the time of your trial or plea? _____

Explain how this affects your case: _____

RECANTATION OF TESTIMONY

If a witness who testified against you has now recanted, tell us who and how you became aware of it. Did this person reach out to you or did you reach out to them? If a third person was involved, tell us who and how he or she came to be involved: _____

ALIBI INFORMATION

If you have an alibi, please provide the specific details. Where were you? What were you doing? Who were you with? Include names and contact information for witnesses who can verify your whereabouts, as well your relationship to this witness. _____

Did you discuss your alibi with your attorney? Yes No

If no, why not? _____

Did you attempt to prove this alibi at trial? Yes No

If yes, how? _____

If no, why not? _____

POLICE OFFICER MISCONDUCT

If any of the law enforcement agents who participated in the investigation of your crime have been arrested or fired, what is that officer's name and badge number, and what was the reason for the arrest or firing? _____

If you believe that a law enforcement agent associated with your case behaved inappropriately or in violation of your civil rights, please describe how so and when: _____

How does either of the above affect your case? _____

DNA INFORMATION

If DNA material was collected and/or tested in your case, what is your understanding of the results?

List any collected evidence or DNA material that has not been tested and how this affects your case:

SCIENTIFIC EVIDENCE/EXPERT TESTIMONY

If experts testified at your trial, who were they and what is your understanding of their testimony?

If you have become aware of a new advancement in a scientific field of study that could affect your case, please explain: _____

WITHHELD EVIDENCE OR *BRADY* INFORMATION

If you claim the prosecution did not give your defense team certain evidence or *Brady* information (exculpatory, mitigating or impeachment evidence), please describe in detail the evidence or information that you believe was not provided: _____

How did you come to know of the existence of this unprovided evidence or information? _____

Can you provide a copy of a letter or an affidavit from your trial attorney verifying that this information was not turned over? Yes No

OTHER

Please describe any other claims not covered above, or any other information you believe might be needed to conduct a review of your case: _____

SECTION V | ACKNOWLEDGMENTS AND CONSENT

Initial each statement below to indicate your understanding and agreement.

- I acknowledge that I have read the Instructions, Eligibility Criteria and Advice of Rights found on the first page of this Review Request.
- I understand that CIU is not my attorney. I will not receive legal advice, and my communication with CIU is not protected by attorney-client privilege.
- I understand all determinations made, including whether to accept my review as well as how my claims will be investigated, are at the sole discretion of CIU.
- I understand that CIU might determine my review request does not meet its eligibility criteria and reject it at any point.
- I understand that I am not entitled to any explanation as to why CIU has determined that my review request does not meet its criteria, has decided to take no action regarding it, or has rejected it at any point.
- I understand that I have no right to a CIU review. I understand this is an extrajudicial process, and as such there is no right of appeal from a decision by CIU.
- I consent to being interviewed by CIU concerning the conviction that is the subject of this review request, to cooperate fully with CIU's investigation, and to provide access to any evidence or other information concerning the conviction available to me.
- I understand that CIU will need to determine what information was disclosed by the State to any previous counsel to fully investigate any claims of State misconduct.
- I consent to allowing CIU to communicate with my previous counsel and to access my client file – as maintained by previous counsel – and to view any information contained within it ***other than privileged communications or attorney work-product.***
- I understand that submitting this request does not extend the deadlines for any other appellate or post-conviction remedies and that I must pursue those remedies separately.
- I certify that all information in this review request is true and accurate, and I acknowledge that providing false information will result in a rejection of my review request.
- I acknowledge that I have read and understood all the above statements and that my agreement to cooperate and giving of information is made voluntarily of my own free will.

CERTIFICATION | CONVICTED PERSON

My name is _____, my date of birth is ____/____/_____, my inmate identifying number, if any, is _____, and my address (or place in which I am currently incarcerated) is _____.

I declare under penalty of perjury that the foregoing is true and correct.

Signature of Convicted Person

Executed in _____ County, State of Texas, on ____/____/_____.

CERTIFICATION | ATTORNEY FOR CONVICTED PERSON (if currently represented by counsel)

I hereby certify that I have fully explained to the convicted offender the above statement and that his/her signature is a result of an independent and informed decision made by him/her.

Signature of Attorney for Convicted Offender

Printed Name of Attorney for Convicted Person

_____/_____
State/Bar Card Number

_____/____/_____
Date