

**NEW ENGLAND INNOCENCE PROJECT  
SCREENING QUESTIONNAIRE**

The New England Innocence Project (“NEIP”) will use this questionnaire to decide whether your case is appropriate for NEIP to handle. Please answer, as fully as you can, all of the questions that apply to your case. As you go through the questionnaire, if you do not understand a question, please write, “I do not understand this question.” If you do not know the answer to a question that you think applies to you, please indicate that as well.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

INMATE NUMBER: \_\_\_\_\_

**ABOUT YOU AND YOUR CASE**

1. In the space provided below please give a detailed factual summary of the incident(s) (including dates and names) for which you were convicted and are currently incarcerated:

2. What is your first language?

3. Do you use any other languages?

If so, what language(s)?

4. Date of birth:

5. Highest grade completed in school?

6. Date of Arrest:

7. Place of Arrest:

8. List all crimes for which you were charged in this case:

9. List all crimes for which you were convicted in this case:

10. Are you currently represented by an attorney? If so, please provide his/her name, address, and telephone number:

11. **Please use a copy of your Department of Corrections Timesheet to Answer the Following Questions:**

A. What crimes are you serving time for?

B. How much time were you sentenced to serve for each of those crimes?

- C. If you are serving time for more than one sentence, are you serving your sentences concurrently (at the same time), or consecutively (one after the other)?
- D. If you will be up for parole, please indicate when.
12. Date and place of conviction(s) (Town, County and State):
13. For each crime for which you were convicted, please answer yes or no to the following questions:
- A. Did you or your attorney present an alibi defense at trial? (This is where you argued that you could not have committed the crime because you were somewhere else when the crime was committed)
- B. Did your attorney argue that you committed the crime in self-defense (or in defense of another person)?
- C. Did your attorney argue that you committed the crime under duress? (This is where someone threatened you with harm unless you committed the crime)
- D. Did your attorney raise any defense related to a psychiatric condition or mental illness?
- E. Did your attorney raise any other defense at trial?
- F. If you answered “yes” to any of the above questions, please give a 3-sentence description of the evidence presented.
14. Did you know the victim?
15. Did you participate in a line-up?
16. Were you identified from a line-up?
17. Were you identified from a photo array?
18. When was the first time you spoke with your lawyer after you were arrested?

19. Did you give a statement or Confession? Yes \_\_\_\_\_ No \_\_\_\_\_

Briefly describe what you told the police.

20. List what items of evidence from your case you think can be subjected to a DNA test (and how that test will show you are innocent):

*Here are two examples of what we mean:*

*Example 1: If your case involves a sexual assault, are there: (A) vaginal swabs from the victim, (B) anal swabs, (C) semen stains on clothing from the victim or other material at the crime scene, such as sheets or blankets, (D) hairs found on the victim or at the scene?*

*Example 2: If your case involves an assault or homicide, are there (A) biological materials, such as blood, semen or hair found at the scene which can be tested to show they did not come from the defendant, (B) biological materials, such as blood, semen or hair found on you or your property which can be tested to show that they did not come from the victim?*

Please list that evidence:

How will a DNA test of the evidence prove your innocence?

### PHYSICAL AND BIOLOGICAL EVIDENCE

21. Was any physical and/or biological evidence recovered during the investigation of your case? Yes \_\_\_\_\_ No \_\_\_\_\_

**If physical and/or biological evidence was recovered, please answer the following questions as completely as you can:**

22. Were any bodily fluids or hair samples obtained from the victim? For example: vaginal secretions, anal secretions, blood or saliva Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes," What samples were obtained?

23. Were any bodily fluids or hair samples obtained from you? Yes\_\_\_\_\_ No\_\_\_\_\_ *Example: blood, saliva, hair.*

If "Yes," What samples were obtained?

24. Were bodily fluids or hair found at the crime scene? Yes\_\_\_\_\_ No\_\_\_\_\_

If "Yes," What was found?

25. Were bodily fluids or hair found on your clothing? Yes\_\_\_\_\_ No\_\_\_\_\_ *Example: blood, saliva, semen*

If "Yes," What was found?

26. Were bodily fluids found on the victim's clothing? Yes\_\_\_\_\_ No\_\_\_\_\_ *Example: blood or semen stains*

If "Yes," What was found?

27. Was any testing done on the bodily fluids or hair samples? Yes\_\_\_\_\_ No\_\_\_\_\_

28. What kind of testing was done? *(For example, blood group typing (A, B, O), hair and fiber comparison, DNA testing (RFLP, PCR), etc.)*

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29. Who arranged to have the testing done? Prosecution\_\_\_\_ Defense\_\_\_\_

30. What laboratory or laboratories did the testing?

31. Was a second test done? Yes\_\_\_\_ No\_\_\_\_

32. If "Yes," what type of testing was done?

33. Who arranged to have the second test done? Prosecution\_\_\_\_ Defense\_\_\_\_

34. What laboratory or laboratories did the second testing?

35. Was testing done on all of the physical/biological evidence recovered during the investigation of your case? Yes\_\_\_\_ No\_\_\_\_

If no, what evidence was *not* tested?

36. Were the results of the tests used at trial? Yes\_\_\_\_ No\_\_\_\_

If "No," Why not?

37. Were the results of the tests used in your appeal(s)? Yes\_\_\_\_ No\_\_\_\_

If "No," Why not?

38. Does any of the physical evidence still exist? Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes,"

A. What is it?

B. Where is it?

C. Who has it?

39. Would you be willing to submit to a DNA test knowing that the test could confirm your guilt or innocence? Yes \_\_\_\_\_ No \_\_\_\_\_

40. Would you be willing to submit to a lie detector test to assist in proving your innocence? Yes \_\_\_\_\_ No \_\_\_\_\_

### TRIAL

**If you did NOT go to trial, please write "Does Not Apply" for the following questions**

41. Name, address and telephone number of Pre-Trial Attorney(s)

42. Name, address and telephone number of Pre-Trial Prosecuting Attorney(s):

43. Do you have an alibi that proves you could not have committed the crime? Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes,"

A. What is it?

B. Do you have some way to prove the alibi? Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes", how?

44. Is your case one of mistaken identity? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please explain:

45. Did you or your lawyer present any of the following motions: (please answer yes or no)

A. Motion to suppress confession

B. Motion to suppress results of an illegal search/seizure

If so, what items were you trying to have suppressed?

C. Motion to exclude scientific evidence

If so, what evidence were you trying to exclude?

46. Name, address and telephone number of Trial Attorney:

47. Name, address and telephone number of Prosecuting Attorney:

48. Name of Judge during trial:

49. Did you testify? Yes\_\_\_\_\_ No\_\_\_\_\_

50. Did the "victim(s)" testify? Yes\_\_\_\_\_ No\_\_\_\_\_

51. Did an expert(s) testify for the defense or the prosecution? Yes\_\_\_\_\_ No\_\_\_\_\_

*For example: doctor, handwriting analyst, psychiatrist, scientist*

A. For the Defense (Names, Addresses, Telephone):

B. For the Prosecution (Names, Addresses, Telephone):

52. Who else testified at your trial?

A. Defense (Name, Address, Telephone):

B. Prosecution (Name, Address, Telephone):

53. Did the "victim" identify you? Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes," When? Where? (Example: At the scene of the crime; During a line up; In court; Other)

54. Did anyone else identify you? Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes," When? Where?

55. If someone other than the victim identified you, did that person testify? (Name, Address, Telephone)

### **GUILTY PLEA**

**If you did NOT plead guilty, please write "Does Not Apply" for the following questions.**

56. Did you give a statement/confession or enter a Guilty Plea? Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes"

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- A. Who did you give the statement to?
- B. Was your lawyer with you when you signed the statement? Yes \_\_\_\_\_ No \_\_\_\_\_
- C. Was it a written statement? Yes \_\_\_\_\_ No \_\_\_\_\_  
If "Yes," Did you sign it? Yes \_\_\_\_\_ No \_\_\_\_\_
- D. Why did you give a statement?
57. Did your attorney talk to you about the plea agreement? Yes \_\_\_\_\_ No \_\_\_\_\_  
If "Yes," What did your attorney say to you?
58. If English is not your first language, did an interpreter explain the plea agreement to you? Yes \_\_\_\_\_ No \_\_\_\_\_
59. Did you understand the plea agreement? What did it mean to you? Yes \_\_\_\_\_ No \_\_\_\_\_
60. Did you understand the charges that you were pleading to?
61. Was the plea in writing? Yes \_\_\_\_\_ No \_\_\_\_\_
62. If the plea was in writing, did you sign it? Yes \_\_\_\_\_ No \_\_\_\_\_  
If "Yes," Was your attorney with you when you signed the plea agreement? Yes \_\_\_\_\_ No \_\_\_\_\_
63. Did you understand what you were signing? What do you think you signed?

64. When did you go to court and plead guilty?
65. Did the judge ask you if you understood the plea agreement? Yes\_\_\_\_\_ No\_\_\_\_\_
66. Was your attorney with you in court when you pled guilty? Yes\_\_\_\_\_ No\_\_\_\_\_
- If “No,” Did you ask for your attorney? Yes\_\_\_\_\_ No\_\_\_\_\_
67. Did you want to plead guilty or did you want to go to trial?
68. Why did you plead guilty?
69. Did you know that you could withdraw your plea? Yes\_\_\_\_\_ No\_\_\_\_\_
70. If “Yes,” Did you try to withdraw your plea? Yes\_\_\_\_\_ No\_\_\_\_\_

### APPEAL

**If you have NOT appealed, please write “Does Not Apply” to the following questions.**

71. How many appeals have you filed?
72. Name, address and telephone number of Appellate Attorney(s):
73. Name, address and telephone number of Appellate Prosecutor(s):

74. Name of Judge who decided your appeal(s):
75. Date(s) decided:
76. What Court(s) heard your appeal(s)?  
*(These courts may include: Massachusetts Superior Court, Massachusetts Court of Appeals, Massachusetts Supreme Judicial Court, United States Federal District Court of the District of Massachusetts, United States Court of Appeals for the First Circuit)*

### POST-CONVICTION MOTIONS

**If you did NOT file any post-conviction motions, please write in “Does Not Apply” to the following questions.**

77. Did you file any post-conviction motions?
78. If so, what motion(s)? *(For example, a petition for habeas corpus or a Rule 30 Motion for a New Trial).*
79. What Court(s) heard your post-conviction motion(s)?
80. Name of Judge who decided your post-conviction motion(s):
81. Date(s) decided:

### CASE MATERIALS

**Please place a checkmark next to the items that exist in your case which you can make available to us. Please do not send anything until we specifically request it.**

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82. Hearing Transcript(s) (For example, confession suppression, evidence suppression, scientific admissibility) \_\_\_\_\_
83. Trial Transcript(s) \_\_\_\_\_
84. Police Report(s) (Please describe) \_\_\_\_\_
85. Laboratory Report(s) (Please describe) \_\_\_\_\_
86. Appellate Briefs: \_\_\_\_\_  
Appellant (defense) \_\_\_\_\_  
Respondent (Commonwealth) \_\_\_\_\_
87. Secondary Appellate Briefs: \_\_\_\_\_  
Appellant (defense) \_\_\_\_\_  
Respondent (prosecution) \_\_\_\_\_
88. Post-Conviction Briefs: \_\_\_\_\_  
Defendant's \_\_\_\_\_  
Commonwealth's \_\_\_\_\_
89. Please list any other information that would be helpful for us to know about your case.

**THANK YOU FOR COMPLETING THIS QUESTIONNAIRE.**

**Please return to:  
The New England Innocence Project  
c/o Goodwin | Procter LLP  
Exchange Place  
53 State Street  
Boston, MA 02109**

## **New England Innocence Project**

### **CONSENT FOR RELEASE OF INFORMATION**

I, \_\_\_\_\_, hereby authorize any attorney, law student, or staff member working with the New England Innocence Project (NEIP) to communicate with my former attorneys, the Department of Corrections, probation and parole officers, and all other persons or governmental agencies having information he or she deems necessary in evaluating my case, and to examine and photocopy all documents pertaining to me in the possession of such persons or agencies.

This document authorizes and directs my former attorneys, the Department of Corrections, probation and parole officers, and all other persons or governmental agencies to discuss my privileged communications and release any and all records, files, scientific reports, biological test results, interview summaries, investigative reports, and other relevant information of any kind, related to me or to any criminal case involving me to the NEIP. I fully understand that there may be statutes, rules, and regulations that protect the confidentiality of the information covered by this release; it is my specific intent to waive the protection of all such statutes, rules, and regulations. By my signature below, I represent that this waiver is voluntary and given without any reservation.

The NEIP's attorneys, law students and staff members will keep all privileged files and communications confidential.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_.

\_\_\_\_\_  
**Signature**