

NEW ENGLAND INNOCENCE PROJECT

SCREENING QUESTIONNAIRE

**PLEASE READ THESE INSTRUCTIONS CAREFULLY AND
ANSWER ALL QUESTIONS.**

The New England Innocence Project (“NEIP”) will use this questionnaire to decide whether your case is appropriate for NEIP to handle. NEIP provides pro bono legal assistance to inmates who have claims of actual innocence. Our mission is to consider cases in which a conviction is final and in which scientific testing or other investigative leads could establish a strong likelihood that the individual is factually innocent.

Completing the enclosed questionnaire will help us determine whether your case is appropriate for our review. NEIP only handles cases decided in New England, which includes the following states: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont. Please do not fill out this questionnaire if your case was decided in another state. If your case was decided in a state outside of New England, we invite you to send us a request for the contact information of an Innocence Project in your area.

NEIP strongly prefers that you complete this questionnaire yourself. We want to hear your story *in your own words*. Please do not send legal analysis. If you have a disability or other condition that prevents you from filling out the questionnaire, then a close family member or your trial/appellate attorney may assist you. Please clearly indicate on the final page of the questionnaire if you have someone help you fill it out. *Under no circumstances should you hire or pay someone to fill out this questionnaire. NEIP does not have relationships with other parties or organizations that ask for money to assist with innocence claims.*

Please answer, with as much detail as possible, all of the following questions. Please attach additional pages if you need more room to respond to a question. Incomplete questionnaires will be returned. We accept handwritten and typed responses. If you handwrite your responses, please print your answers clearly and neatly in pen, not pencil. If we cannot read your responses, we will return the questionnaire to you and ask you to fill it out again. 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 think a question applies to you, please write “*Not Applicable.*” If you do not know the answer to a question that you think applies to you, please indicate that as well. Please remember to print your name, date, and sign the Consent for Release of Information Form on the last page.

FIRST NAME: _____

MIDDLE NAME: _____

LAST NAME: _____

SUFFIX (Jr./Sr./etc.): _____

MAIDEN NAME: _____

ALIASES: _____

PREFIX (Mr.Ms./etc.): _____

Prior to today, have you ever submitted a questionnaire to NEIP? _____

If your answer is yes, write the date on which you submitted your previous questionnaire: _____

If your answer is yes, write the full name under which you submitted your previous questionnaire: _____

Did NEIP make a decision on whether or not to accept your case? What was the decision?: _____

TODAY'S DATE (Month, Date, and Year): _____

INMATE NUMBER: _____

CORRECTIONAL FACILITY: _____

CORRECTIONAL FACILITY'S STREET ADDRESS AND CITY, STATE, and ZIP CODE:

CORRECTIONAL FACILITY'S P.O. BOX ADDRESS AND CITY, STATE, and ZIP CODE:

Are you currently represented by an attorney?: _____
If so, please provide his/her name, address, telephone number, and any other relevant contact information you have in the blank below.

How did you learn about NEIP? Please check all that apply:

___ From a fellow inmate

___ Current or former attorney

___ Friends and family

___ Newspaper, newsletter or flyer

If so, which newspaper, newsletter or flyer?: _____

___ Prisoner Legal Services Group or other nonprofit

If so, which one? : _____

___ Referred from another Innocence Project

If so, which one?: _____

___ Radio

If so, which program?: _____

___ Television

If so, which program?: _____

___ Website

___ Other, please explain: _____

ABOUT YOU AND YOUR CASE

1. Briefly describe the facts of your case in as much detail as possible and explain how you are innocent (include dates, names, and details of the crime for which you were convicted).

2. What is your first language?

3. Do you use any other languages?

If so, what language(s)?

4. Date of birth (Month, Date, and Year):

5. Highest grade completed in school?

6. List any schools you attended after high school:

7. Did you have Special Education issues? Yes ___ No _____. If Yes, please describe.

8. Have you ever received mental health treatment? Yes ___ No ___ If Yes, please describe.

9. Prior to this conviction, had you ever been convicted of another crime? If yes, please list the dates and offenses of which you were convicted:

10. Were you employed at the time of your arrest? If so, please provide the name, address, and telephone number of your employer:

11. Please provide the names, addresses, and phone numbers of family and friends who might have information regarding your case:

12. Do we have your permission to contact these people to discuss the specific details of your case? Yes _____ No _____

If not, why not?

13. Date of Arrest (Month, Date, and Year):

14. Place of Arrest (City, State):

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

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

17. A) Date of conviction:
- B) Place of Conviction(s)(Town, County and State):
18. Were you convicted as a joint venturer?:

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

19. What crimes are you serving time for?
20. How much time were you sentenced to serve for each of those crimes?
21. 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)?
22. If you will be up for parole, please indicate when.
23. Do you believe that you have an alibi that proves you could not have committed the crime for which you were convicted? Yes _____ No _____. (This is where you argue that you could not have committed the crime because you were somewhere else when the crime was committed)

If "Yes," what is your alibi?

24. Was this alibi raised at trial? Yes _____ No _____.

If "No," why wasn't your alibi raised at trial?

25. Do you have some way to prove the alibi? Yes _____ No _____

If "Yes," how?

26. Is a witness recantation statement needed to prove your innocence? Yes _____ No _____

If "Yes," who needs to recant their testimony or identification?

27. Did You Know the "victim"(s)? Yes _____ No _____

If yes, how did you know the victim(s)?

28. Did you participate in a line-up?

29. Were you identified from a line-up?

30. Were you identified from a photo array?

31. Is There Anyone Who Can Prove Your Innocence? Yes ___ No ___

If yes, who is this person(s) and how can they prove your innocence?

How can we reach them? (please provide addresses, telephone numbers)

32. Did This Person(s) Already Testify At Your Trial? Yes ___ No ___

If yes, how would their testimony be different now?

If no, why didn't they testify?

33. When was the first time you spoke with your lawyer after you were arrested?

34. Did the police or investigating detective ever interview you? Yes _____ No _____

If "Yes," how many times were you interviewed? _____

How long did the interviews last? _____

If yes, what did you say to the Police?

Did you ask to speak with a lawyer during the interview? Yes _____ No _____

35. Did you give a statement (not a confession) to the police relating to the crime for which you were convicted? Yes _____ No _____

If you answered "yes", please describe what you told the police.

Was it a written statement? Yes _____ No _____

If "Yes," did you sign it? Yes _____ No _____

Was your lawyer present when you signed the statement? Yes _____ No _____

Why did you give a statement?

36. Did you give a confession to the police relating to the crime for which you were convicted? Yes _____ No _____

If you answered “yes”, please describe all the crimes to which you confessed and what you told the police.

Was that confession used at trial?

37. If there are items of evidence from your case you think can be subjected to a DNA test please list them here and describe how that test could 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?

TRIAL

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

38. Name, address and telephone number of Pre-Trial Attorney(s)
39. Name, address and telephone number of Pre-Trial Prosecuting Attorney(s):
40. Is your case one of mistaken identity? Yes ____ No ____
If so, please explain:
41. Did you or your lawyer present any of the following motions: (please answer yes or no)
Motion to suppress confession _____
Motion to suppress results of an illegal search/seizure _____
If so, what items were you trying to have suppressed?

Motion to exclude scientific evidence _____
If so, what evidence were you trying to exclude?
42. Name, address and telephone number of Trial Attorney:
43. Name, address and telephone number of Prosecuting Attorney:

Please describe the defense that you or your attorney raised at trial. (For example, if you were convicted of rape, did you assert that the sex was consensual, or that you were wrongfully identified as the assailant? Or did you argue self-defense, present an alibi, or raise some other defense?)

Briefly describe the Prosecution's theory of your case at trial:

44. Name of Judge during trial:

45. Did you testify? Yes____ No____

If not, why not?

46. Did the "victim(s)" testify? Yes____ No____

47. 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):

48. Who else testified at your trial?

A. Defense (Name, Address, Telephone):

B. Prosecution (Name, Address, Telephone):

49. Did the "victim" identify you as the person who committed the crime? Yes ___ No ___

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

50. Did anyone else identify you as the person who committed the crime? Yes ___ No ___

If "Yes," When? Where?

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

52. Did you have any co-defendants? If so, did they plead guilty or go to trial? Were they also convicted? Did any of them testify against you?
53. Did any police informants or snitches testify against you at your trial?
54. Did any informant or snitch who testified claim to have learned information about your case from you while you were in jail?
55. Are there any facts we should know about your jury?
56. Did any informant or snitch claim to have learned any information from you about your case before you were arrested?
57. Did anybody testify against you in exchange for a promise of leniency in his or her own case?
58. Did anyone who testified against you, including the “victim”, have a reason to lie? If yes, please explain.

PHYSICAL AND BIOLOGICAL EVIDENCE

59. What new evidence exists in your case that would lead to proof of innocence?

60. 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:

61. 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?

62. Were any bodily fluids or hair samples obtained from you? Example: blood, saliva, hair. Yes _____ No _____

If "Yes," What samples were obtained?

63. Were bodily fluids or hair found at the crime scene? Yes _____ No _____

If "Yes," What was found?

64. Were bodily fluids or hair found on your clothing? Example: blood, saliva, semen Yes _____ No _____

If "Yes," What was found?

65. Were bodily fluids found on the victim's clothing? Yes ____ No ____
Example: blood or semen stains

If "Yes," What was found?

66. Was any testing done on the bodily fluids or hair samples? Yes ____ No ____

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

68. Who arranged to have the testing done? Prosecution ____ Defense ____

69. What laboratory or laboratories did the testing?

70. Was a second test done? Yes ____ No ____

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

Who arranged to have the second test done? Prosecution ____ Defense ____

What laboratory or laboratories did the second testing?

71. 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?

72. Were the results of the tests used at trial? Yes _____ No _____

If "No," Why not?

73. Were the results of the tests used in your appeal(s)? Yes _____ No _____

If "No," Why not?

74. Does any of the physical evidence still exist? Yes _____ No _____

If "Yes,"

A. What is it?

B. Where is it?

C. Who has it?

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

76. Would you be willing to submit to a lie detector test to assist in proving your innocence? Yes _____ No _____

PART IX: POST-CONVICTION EVIDENCE

77. Has a victim or witness come forward to exonerate you since your conviction?
Yes _____ No _____

78. If yes, who? How and why has his or her story changed?

79. Has any other way to prove your innocence developed after your trial? (For example, has someone else confessed to the crime?) If so, please describe.

80. Do you know who committed the crime(s) of which you were convicted?
Yes _____ No _____

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

How do you know that this person is the true perpetrator?

81. Is there anything else you would like us to know that could help us prove your innocence?

GUILTY PLEA

If you did NOT plead guilty, please write “Not Applicable” for the following questions.

82. Did you enter a Guilty Plea? Yes ___ No ___

If “Yes”

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?

83. Did your attorney talk to you about the plea agreement? Yes ___ No ___

If “Yes,” What did your attorney say to you?

84. If English is not your first language, did an interpreter explain the plea agreement to you? Yes ___ No ___

85. Did you understand the plea agreement? What did it mean to you? Yes ___ No ___

86. Did you understand the charges that you were pleading to?

87. Was the plea in writing? Yes___ No___

88. 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?

89. Did you understand what you were signing? *What do you think you signed?*

90. When did you go to court and plead guilty?

91. Did the judge ask you if you understood the plea agreement? Yes___ No___

92. Was your attorney with you in court when you pled guilty? Yes___ No___

If “No,” Did you ask for your attorney? Yes___ No___

93. Did you want to plead guilty or did you want to go to trial?

94. Why did you plead guilty?

95. Did you know that you could withdraw your plea? Yes___ No___

96. If “Yes,” Did you try to withdraw your plea? Yes___ No___

APPEAL

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

97. How many appeals have you filed?
98. Name, address and telephone number of Appellate Attorney(s):
99. Name, address and telephone number of Appellate Prosecutor(s):
100. Name of Judge who decided your appeal(s):
101. Date(s) decided:
102. 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; New Hampshire Superior Court; New Hampshire Supreme Court; United States Federal District Court of the District of New Hampshire; Maine Superior Court, Maine Supreme Judicial Court; United States Federal District Court of the District of Maine; Connecticut Superior Court; Connecticut Appellate Court; Connecticut Supreme Court; United States Federal District Court of the District of Connecticut; Vermont Superior Court; Vermont Supreme Court; United States Federal District Court of the District of Vermont; United States Court of Appeals for the Second Circuit; Rhode Island Superior Court; Rhode Island Supreme Court; United States Federal District Court of the District of Rhode Island.)

POST-CONVICTION MOTIONS

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

103. Did you file any post-conviction motions?

If so, what motion(s)? (For example, a petition for habeas corpus or a Rule 30 Motion for a New Trial).

104. What Court(s) heard your post-conviction motion(s)?

105. Name of Judge who decided your post-conviction motion(s):

106. 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.

107. Hearing Transcript(s) *(For example, confession suppression, evidence suppression, scientific admissibility)*

108. Trial Transcript(s)

109. Police Report(s) *(Please describe)*

110. Laboratory Report(s) *(Please describe)*

111. Appellate Briefs:

Appellant (defense)

Respondent (Commonwealth)

112. Secondary Appellate Briefs:

Appellant (defense)

Respondent (prosecution)

113. Post-Conviction Briefs:

Defendant's

Commonwealth's

114. Please list any other information that would be helpful for us to know about your case.

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE.

**Please return this Questionnaire and the signed Consent for Release of Information Form
(see next page) to:**

**Intake Team
New England Innocence Project
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. Additionally, by signing I am indicating my will that the photocopy of this authorization be accepted with the same authority as the original.

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 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.

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

Signed this _____ day of _____, 20_____.

Signature

If applicable:

Name of person who helped fill out the questionnaire _____

Relationship to inmate _____

Signature _____ Date _____