

IOWA INNOCENCE PROJECT SCREENING QUESTIONNAIRE

Important – Please read the entire form all the way through before you begin to complete it, so that you will put all of the information we need in the correct section. After you have read the entire form all the way through, please complete each section in it and return ALL of the pages to us. We cannot screen your case if you do not return all of the pages to us. If more space is needed to answer a question, write out the question as it appears on this form and your response on separate sheets of paper and attach the separate sheets to this document.

SECTION I: INDIVIDUAL INFORMATION

1.1 Applicant's Full Name: _____

1.2 Iowa DOC No.: _____ 1.3 Social Security No.: _____

1.4 Current Institution: _____

1.5 Complete Mailing Address: _____

1.6 Date of Birth: _____ 1.7 Place of Birth: _____ 1.8 U.S. Citizen? *Yes No*

1.9 Highest Level of Education Completed: *G.E.D. H.S. Diploma Associate Bachelor's Master's Doctorate*

1.10 List each trial court case number and county of each case for which you are asking our help.

1.11 List contact information about your closest living relative.

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

How is this person related to you? _____

1.12 List contact information of anyone willing to assist you or us in obtaining information in the county in which you were convicted.

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

How will this person help you or us? _____

1.13 List information about each conviction for which you are asking our help.

Crime: _____

Date of Crime: _____ State or Federal Crime? *State Federal*

State & County of Conviction: _____

Name of Victim: _____

Additional Crime: _____

Date of Crime: _____ State or Federal Crime? *State Federal*

State & County of Conviction: _____

Name of Victim: _____

SECTION II: CONVICTION INFORMATION

List each crime for which you are now serving time, even if you do not need our help with one of the crimes for which you are currently serving time.

2.1 Crime: _____
Date of Conviction: _____ State or Federal Conviction? *State Federal*
Sentence Imposed: _____
Time Remaining on Sentence: _____
State & County of Conviction: _____
Trial Court (State/District/Division): _____
Trial Court Case No.: _____ Trial Court Judge: _____
Did you go to trial or plead guilty to this crime? *Trial Pled Guilty*
Do you have an attorney currently representing you on this conviction? *Yes No*
If "yes," list contact information of your attorney.
Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone No.'s: _____
Do you need our help with this conviction? *Yes No*

2.2 Additional Crime: _____
Date of Conviction: _____ State or Federal Conviction? *State Federal*
Sentence Imposed: _____
Time Remaining on Sentence: _____
State & County of Conviction: _____
Trial Court (State/District/Division): _____
Trial Court Case No.: _____ Trial Court Judge: _____
Did you go to trial or plead guilty to this crime? *Trial Pled Guilty*
Do you have an attorney currently representing you on this conviction? *Yes No*
If "yes," list contact information of your attorney.
Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone No.'s: _____
Do you need our help with this conviction? *Yes No*

2.3 Additional Crime: _____
Date of Conviction: _____ State or Federal Conviction? *State Federal*
Sentence Imposed: _____
Time Remaining on Sentence: _____
State & County of Conviction: _____
Trial Court (State/District/Division): _____
Trial Court Case No.: _____ Trial Court Judge: _____
Did you go to trial or plead guilty to this crime? *Trial Pled Guilty*
Do you have an attorney currently representing you on this conviction? *Yes No*
If "yes," list contact information of your attorney.
Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone No.'s: _____
Do you need our help with this conviction? *Yes No*

SECTION IV: IDENTIFICATIONS & CONFESSIONS

- 4.1 On what date(s) were you arrested for the crime(s) in Section III above? _____
- 4.2 In what county and state were you arrested for the crime(s) in Section III above? _____
- 4.3 Did you know the victim(s)? *Yes No* If "yes," explain how you knew the victim(s). _____

- 4.4 Did the victim identify you as the perpetrator? *Yes No*
- 4.5 Did a witness, other than the victim, identify you as the perpetrator? *Yes No*
- 4.6 Did you participate in a line-up? *Yes No* If "yes," did you have an attorney present at the line-up? *Yes No*
- 4.7 Were you identified from a line-up? *Yes No*
- 4.8 Were you identified from a photo array (sometimes called a "six pack")? *Yes No*
- 4.9 Did you give a statement or confession anytime prior to trial? *Yes No*
- 4.10 If you gave a statement or confession, answer the following questions; otherwise, go to the next page.

To whom did you give a statement or confession? _____

Was the statement or confession recorded? *Yes No* If "yes," how? *Audio Video Both*

Was the statement or confession verbal, written, or both? *Verbal Written Both*

If the statement or confession was written, did you write it yourself? *Yes No* Did you sign it? *Yes No*

Were you given a polygraph test? *Yes No* If "yes," did you pass it? *Yes No Don't Know*

Where did the interrogation occur? _____

How long did the interrogation last? _____

Did you have an attorney present when you gave the statement or confession? *Yes No*

Why did you give a statement or confession? _____

What did you say in the statement or confession? _____

Did you or your attorney file a motion to suppress the statement or conviction? *Yes No*

If a motion to suppress was filed, answer the following questions.

Date Motion was Filed: _____ Court where Motion was Filed: _____

Grounds Raised in Motion: _____

Name of Attorney: _____

Date Motion was Decided: _____ Judge who Decided the Motion: _____

Result of Motion: *Granted in its Entirety Denied in its Entirety Granted in Part/Denied in Part*

Was this issue raised in an appeal? *Yes No*

SECTION V: BIOLOGICAL EVIDENCE

5.1 What biological evidence, if any, was recovered during the investigation of your case? Examples of biological evidence include vaginal swabs; semen stains from the victim's clothing or the crime scene; blood, hair, or other physical evidence from the crime scene; DNA samples; fingerprints; bite-marks; etc.

5.2 What kind of scientific testing, if any, was conducted on the biological evidence, who conducted the tests, and what were the results of the tests? Examples of scientific testing include blood typing; hair or fiber analysis; DNA testing; fingerprint comparisons; bite-mark analysis; etc.

5.3 Did you or your attorney file a motion to suppress any of the biological evidence, including any of the test results? *Yes No Not Applicable*

If a motion to suppress was filed, answer the following questions.

Date Motion was Filed: _____ Court where Motion was Filed: _____

Grounds Raised in Motion: _____

Name of Attorney: _____

Date Motion was Decided: _____ Judge who Decided the Motion: _____

Result of Motion: *Granted in its Entirety Denied in its Entirety Granted in Part/Denied in Part*

Was this issue raised in an appeal? *Yes No*

5.4 Did you or your attorney retain your own expert witness to examine, inspect, or test any of the biological evidence? *Yes No Not Applicable*

If "yes," answer the following questions.

Name of Expert: _____

Type of Examination, Inspection, or Testing Performed: _____

Results of Examination, Inspection, or Testing: _____

5.5 Where is the biological evidence, if any currently located? _____

SECTION VI: WITNESSES (SHEET 1 OF 4)

6.1 List contact information about each individual who has, or supposedly has, information about your case, regardless of whether the information harms or helps your case, regardless of whether the individual was disclosed during discovery, and regardless of whether the individual testified at trial.

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

SECTION VI: WITNESSES (SHEET 2 OF 4)

6.2 List contact information about each individual who has, or supposedly has, information about your case, regardless of whether the information harms or helps your case, regardless of whether the individual was disclosed during discovery, and regardless of whether the individual testified at trial.

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

SECTION VI: WITNESSES (SHEET 3 OF 4)

6.3 List contact information about each individual who has, or supposedly has, information about your case, regardless of whether the information harms or helps your case, regardless of whether the individual was disclosed during discovery, and regardless of whether the individual testified at trial.

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Is this witness more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe what the witness knows, or supposedly knows, about the case. _____

Was this witness disclosed in discovery? *Yes No*

If there was a trial, did this witness testify? *Yes No* If "no," why not? _____

SECTION VI: WITNESSES (SHEET 4 OF 4)

6.4 Did you or your attorney file a motion to suppress any witness testimony? *Yes No*

If a motion to suppress was filed, answer the following questions.

Date Motion was Filed: _____ Court where Motion was Filed: _____

Witness Testimony Sought to be Suppressed: _____

Grounds Raised in Motion: _____

Name of Attorney: _____

Date Motion was Decided: _____ Judge who Decided the Motion: _____

Result of Motion: *Granted in its Entirety Denied in its Entirety Granted in Part/Denied in Part*

Was this issue raised in an appeal? *Yes No*

6.5 If there was a trial, were you or your attorney unsuccessful in attempting to use, admit, or introduce any witness testimony at trial? *Yes No*

If so, answer the following questions.

Witness Testimony Sought to be Used, Admitted, or Introduced: _____

Grounds for Denying Witness Testimony from being Used, Admitted, or Introduced: _____

Name of Attorney: _____

Judge who Denied the Testimony from being Used, Admitted, or Introduced: _____

Was this issue raised in an appeal? *Yes No*

6.6 Were any helpful witnesses discovered for the first time after trial, or after you entered a plea of guilty to the case? *Yes No*

If so, answer the following questions.

Name of Witness: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

Describe what the witness knows, or supposedly knows, about the case. _____

Did you or your attorney, after discovering the witness, file a motion for new trial or a motion to withdraw or set aside the guilty plea? *Yes No*

SECTION VII: PHYSICAL EVIDENCE (SHEET 1 OF 4)

7.1 List information about each piece of evidence, with the exception of the biological evidence disclosed above, that relates to your case, regardless of whether the evidence harms or helps your case, regardless of whether the evidence was disclosed during discovery, and regardless of whether the evidence was used at trial.

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

SECTION VII: PHYSICAL EVIDENCE (SHEET 2 OF 4)

7.2 List information about each piece of evidence, with the exception of the biological evidence disclosed above, that relates to your case, regardless of whether the evidence harms or helps your case, regardless of whether the evidence was disclosed during discovery, and regardless of whether the evidence was used at trial.

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

SECTION VII: PHYSICAL EVIDENCE (SHEET 3 OF 4)

7.3 List information about each piece of evidence, with the exception of the biological evidence disclosed above, that relates to your case, regardless of whether the evidence harms or helps your case, regardless of whether the evidence was disclosed during discovery, and regardless of whether the evidence was used at trial.

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

Description of Evidence: _____

Current Location of Evidence: _____

Is this evidence more helpful to the defense or to the prosecution? *Defense Prosecution*

Describe how the evidence tended to prove, or disprove, guilt. _____

Was this evidence disclosed in discovery? *Yes No*

If there was a trial, was this evidence used? *Yes No* If "no," why not? _____

SECTION VII: PHYSICAL EVIDENCE (SHEET 4 OF 4)

7.4 Did you or your attorney file a motion to suppress any of the evidence listed above? *Yes No*

If a motion to suppress was filed, answer the following questions.

Date Motion was Filed: _____ Court where Motion was Filed: _____

Evidence Sought to be Suppressed: _____

Grounds Raised in Motion: _____

Name of Attorney: _____

Date Motion was Decided: _____ Judge who Decided the Motion: _____

Result of Motion: *Granted in its Entirety Denied in its Entirety Granted in Part/Denied in Part*

Was this issue raised in an appeal? *Yes No*

7.5 If there was a trial, were you or your attorney unsuccessful in attempting to use, admit, or introduce any of the evidence at trial? *Yes No*

If so, answer the following questions.

Evidence Sought to be Used, Admitted, or Introduced: _____

Grounds for Denying Evidence from being Used, Admitted, or Introduced: _____

Name of Attorney: _____

Judge who Denied the Evidence from being Used, Admitted, or Introduced: _____

Was this issue raised in an appeal? *Yes No*

7.6 Was any helpful evidence discovered for the first time after trial, or after you entered a plea of guilty to the case? *Yes No*

If so, answer the following questions.

Description of Evidence: _____

Current Location of Evidence: _____

Describe what the evidence tends to prove, or disprove, guilt. _____

Did you or your attorney, after discovering the evidence, file a motion for new trial or a motion to withdraw or set aside the guilty plea? *Yes No*

SECTION VIII: PLEA

8.1 Did you go to trial, or did you plead guilty to the crime? *Trial Pled Guilty*

If you pled guilty to the crime, complete the questions on this page; if you went to trial, skip this page and go to the next page.

8.2 Why did you plead guilty instead of going to trial? _____

8.3 Was your plea made as part of a plea agreement with the prosecutor or the court? *Yes No*

If so, what were the terms and conditions of the plea agreement? _____

Have any of the terms and conditions of the plea agreement been violated? *Yes No*

If so, what terms and conditions of the plea agreement have been violated? _____

8.4 Were you coerced, threatened, or forced to enter the plea? *Yes No*

If so, explain how you were coerced, threatened, or forced to enter the plea. _____

8.5 List contact information about each attorney who represented you during, or at, the plea hearing.

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

8.6 Did you or your lawyer file a motion to withdraw or set aside the plea? *Yes No*

If "yes," list information about the motion to withdraw or set aside the plea.

Date Motion was Filed: _____ State & County where Motion was Filed: _____

Grounds Raised in Motion: _____

Name of Attorney: _____

Date Motion was Decided: _____ Judge who Decided the Motion: _____

Result of Motion: *Granted in its Entirety Denied in its Entirety Granted in Part/Denied in Part*

If the motion was denied in whole or in part, was this issue raised in an appeal? *Yes No*

SECTION IX: TRIAL

9.1 Did your case go to trial? *Yes No*

If your case went to trial, complete the questions on this page; if you pled guilty to the crime, be sure that you have completed the questions on the previous page, skip this page, and go to the next page.

9.2 What biological evidence was introduced at trial, and how did the biological evidence help prove, or disprove, guilt? _____

9.3 What identification evidence (surveillance photos, line-ups, eyewitness identifications) was introduced at trial, and how did the identification evidence help prove, or disprove, guilt? _____

9.4 What statements or confessions of yours were introduced at trial, and how did the statements or confessions help prove, or disprove, guilt? _____

9.5 What physical evidence was introduced at trial, and how did the physical evidence help prove, or disprove, guilt? _____

9.6 What witness testimony was introduced at trial, and how did the witness testimony help prove, or disprove, guilt? _____

9.7 Did you testify at trial? *Yes No*

9.8 Did the victim testify at trial? *Yes No*

9.9 List contact information about each attorney who represented you at trial.

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

9.10 What is the name of the prosecutor who tried the case? _____

9.11 What is the name of the trial court judge over presided over the trial? _____

9.12 Did you or your attorney file a motion for new trial? *Yes No*

If "yes," list information about the motion for new trial.

Date Motion was Filed: _____ State & County where Motion was Filed: _____

Grounds Raised in Motion: _____

Date Motion was Decided: _____ Judge who Decided the Motion: _____

Result of Motion: *Granted in its Entirety Denied in its Entirety Granted in Part/Denied in Part*

If the motion was denied in whole or in part, was this issue raised in an appeal? *Yes No*

SECTION X: APPEAL FROM PLEA OR TRIAL

Note: This section pertains only to appeals arising out of a trial or plea; appeals arising out of an unsuccessful post-conviction relief motion or application are addressed in Section XII of this questionnaire.

10.1 Did you or your attorney file a direct appeal from a trial or a plea of guilty? *Yes No*

If “no,” why not? _____

If “yes,” complete the questions on this page; otherwise, go to the next page.

10.2 List information about the first appeal.

Date 1st Appeal was Filed: _____ Court in which Appeal was Filed: _____
Grounds Raised in Appeal: _____

Name of Attorney: _____
Appeal Case No.: _____ Date Appeal was Decided: _____
Result of Appeal: *Affirmed Reversed Affirmed in Part/Reversed in Part Remanded for New Trial*
Case Citation to Appeal (if published): _____

10.3 After the first appeal, was there another appeal/further review? *Yes No* If “yes,” complete this section.

Date 2nd Appeal was Filed: _____ Court in which Appeal was Filed: _____
Grounds Raised in Appeal: _____

Name of Attorney: _____
Appeal Case No.: _____ Date Appeal was Decided: _____
Result of Appeal: *Affirmed Reversed Affirmed in Part/Reversed in Part Remanded for New Trial*
Case Citation to Appeal (if published): _____

10.4 After the second appeal, was there another appeal/further review? *Yes No* If “yes,” complete this section.

Date 3rd Appeal was Filed: _____ Court in which Appeal was Filed: _____
Grounds Raised in Appeal: _____

Name of Attorney: _____
Appeal Case No.: _____ Date Appeal was Decided: _____
Result of Appeal: *Affirmed Reversed Affirmed in Part/Reversed in Part Remanded for New Trial*
Case Citation to Appeal (if published): _____

SECTION XI: POST-CONVICTION RELIEF

11.1 Did you or your attorney file a motion or application for post-conviction relief or habeas corpus? *Yes No*

If "no," why not? _____

If "yes," complete the questions on this page; otherwise, go to the next page. If you filed more than 3 motions or applications for post-conviction relief, attach additional pages.

11.2 List information about the first motion or application for post-conviction relief.

Date Motion was Filed: _____ Court in which Motion was Filed: _____
Grounds Raised in Motion: _____

Name of Attorney: _____

Case No.: _____ Judge: _____

Date Motion was Decided: _____

Result of Motion: *Granted in its Entirety Denied in its Entirety Granted in Part/Denied in Part*

If the motion was denied in whole or in part, was this issue raised in an appeal? *Yes No*

If "yes," then be sure to complete Questions 12.1 and 12.2 on the next page.

11.3 List information about the second motion or application for post-conviction relief, if any.

Date Motion was Filed: _____ Court in which Motion was Filed: _____
Grounds Raised in Motion: _____

Name of Attorney: _____

Case No.: _____ Judge: _____

Date Motion was Decided: _____

Result of Motion: *Granted in its Entirety Denied in its Entirety Granted in Part/Denied in Part*

If the motion was denied in whole or in part, was this issue raised in an appeal? *Yes No*

If "yes," then be sure to complete Question 12.3 on the next page.

11.4 List information about the third motion or application for post-conviction relief, if any.

Date Motion was Filed: _____ Court in which Motion was Filed: _____
Grounds Raised in Motion: _____

Name of Attorney: _____

Case No.: _____ Judge: _____

Date Motion was Decided: _____

Result of Motion: *Granted in its Entirety Denied in its Entirety Granted in Part/Denied in Part*

If the motion was denied in whole or in part, was this issue raised in an appeal? *Yes No*

If "yes," be sure to complete Question 12.4 on the next page.

SECTION XII: APPEAL FROM POST-CONVICTION RELIEF

Note: This section pertains only to appeals arising out of a motion or application for post-conviction relief; appeals arising out of a trial or plea are addressed in Section X of this questionnaire.

12.1 Did you or your attorney file an appeal from a post-conviction motion or application? *Yes No*

If "no," why not? _____

If "yes," complete the questions on this page; otherwise, go to the next page. If you filed more than 3 motions or applications for post-conviction relief, attach additional pages.

12.2 List information about the appeal from the first motion or application for post-conviction relief.

Date Appeal was Filed: _____ Court in which Appeal was Filed: _____
Grounds Raised in Appeal: _____

Name of Attorney: _____

Appeal Case No.: _____ Date Appeal was Decided: _____

Result of Appeal: *Affirmed Reversed Affirmed in Part/Reversed in Part Remanded for Hearing*

Was there a subsequent appeal or review? *Yes No*

If "yes," result of Subsequent Appeal/Review: *Affirmed Reversed Affirmed in Part/Reversed in Part*

12.3 List information about the appeal from the second motion or application for post-conviction relief.

Date Appeal was Filed: _____ Court in which Appeal was Filed: _____
Grounds Raised in Appeal: _____

Name of Attorney: _____

Appeal Case No.: _____ Date Appeal was Decided: _____

Result of Appeal: *Affirmed Reversed Affirmed in Part/Reversed in Part Remanded for Hearing*

Was there a subsequent appeal/review? *Yes No*

If "yes," result of Subsequent Appeal/Review: *Affirmed Reversed Affirmed in Part/Reversed in Part*

12.4 List information about the appeal from the third motion or application for post-conviction relief.

Date Appeal was Filed: _____ Court in which Appeal was Filed: _____
Grounds Raised in Appeal: _____

Name of Attorney: _____

Appeal Case No.: _____ Date Appeal was Decided: _____

Result of Appeal: *Affirmed Reversed Affirmed in Part/Reversed in Part Remanded for Hearing*

Was there a subsequent appeal/review? *Yes No*

If "yes," result of Subsequent Appeal/Review: *Affirmed Reversed Affirmed in Part/Reversed in Part*

SECTION XIII: ATTORNEYS

13.1 Are you currently represented by an attorney for any reason? *Yes No* If "yes," list information about the attorney currently representing you.

Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone No.'s: _____
What type of case is it? _____
What stage is the case in? _____
In what county is the case? _____ What is the case number? _____

13.2 List information about each attorney who has represented you during any portion of your case, regardless of whether the attorney was appointed or privately retained.

Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone No.'s: _____
Stage of Representation: *Plea Trial Appeal/Review Post-Conviction Post-Conviction Appeal*
Do you believe that the attorney was ineffective? *Yes No*
If so, describe how you believe the attorney was ineffective. _____

Have you raised this issue in an appeal or a motion or application for post-conviction relief? *Yes No*

Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone No.'s: _____
Stage of Representation: *Plea Trial Appeal/Review Post-Conviction Post-Conviction Appeal*
Do you believe that the attorney was ineffective? *Yes No*
If so, describe how you believe the attorney was ineffective. _____

Have you raised this issue in an appeal or a motion or application for post-conviction relief? *Yes No*

Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone No.'s: _____
Stage of Representation: *Plea Trial Appeal/Review Post-Conviction Post-Conviction Appeal*
Do you believe that the attorney was ineffective? *Yes No*
If so, describe how you believe the attorney was ineffective. _____

Have you raised this issue in an appeal or a motion or application for post-conviction relief? *Yes No*

SECTION XIV: DNA TESTING

14.1 Do you believe that DNA testing will help prove your innocence? *Yes No*

If "no," why not? _____

If "yes," how? _____

14.2 List each item of evidence that you think can be subjected to a DNA test. Include how you think that test will show you are innocent. For example, were there swabs taken from the victim, blood or semen stains on clothing or other materials at the crime scene, or hairs found on the victim or at the scene?

14.3 Was there biological evidence available that was not introduced at trial? *Yes No*

If so, why was it not introduced? _____

14.4 Has anyone else admitted or confessed to committing the crime? *Yes No*

If so, list contact information about each such person.

Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone No.'s: _____
How did you find out that this person admitted or confessed to committing the crime? _____

To whom did this person make the admission or confession?

Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone No.'s: _____

SECTION XV: CASE MATERIALS

Please do not send any documents until we specifically request them.

15.1 If you entered a plea of guilty, do you have a copy of the hearing transcript? *Yes No* Do you have a copy of the plea agreement? *Yes No*

15.2 Do you have a copy of any pre-trial hearing transcripts? *Yes No*

If “yes,” indicate each type of pre-trial hearing transcript you have (i.e., motion to suppress, motion in limine, etc.).

15.3 Do you have a copy of any pre-trial motions? *Yes No*

If “yes,” indicate each type of pre-trial motion you have (i.e., motion to suppress, motion in limine, etc.).

15.4 If your case went to trial, do you have a copy of your trial transcript? *Yes No*

15.5 Do you have a copy of any police or investigative reports for your case? *Yes No*

If “yes,” please describe each police or investigative report you have (i.e., probable cause affidavit, narrative report, etc.).

15.6 Do you have a copy of any lab reports for your case? *Yes No*

If “yes,” please describe each lab report you have (i.e., DNA analysis, fiber comparison, etc.).

15.7 If there was an appeal, do you have a copy of any appellate briefs for your case? *Yes No*

15.8 Do you have a copy of any post-conviction relief motions or applications? *Yes No* Do you have a copy of any post-conviction relief hearing transcripts? *Yes No*

15.9 Do you have a copy of any newspaper articles or television clips about your case? *Yes No*

15.10 Do you have any other documents that may be helpful to your case? *Yes No*

If “yes,” please describe each document you have and how it helps your case.

SECTION XVII: SUMMARY INFORMATION

17.1 Does your case involve a co-defendant testifying against you?	<i>Yes</i>	<i>No</i>
17.2 Does your case involve a confidential informant?	<i>Yes</i>	<i>No</i>
17.3 Does your case involve a jailhouse snitch?	<i>Yes</i>	<i>No</i>
17.4 Does your case involve a coerced confession?	<i>Yes</i>	<i>No</i>
17.5 Does your case involve a mistaken identification?	<i>Yes</i>	<i>No</i>
17.6 Does your case involve police misconduct?	<i>Yes</i>	<i>No</i>
17.7 Does your case involve prosecutorial misconduct?	<i>Yes</i>	<i>No</i>
17.8 Does your case involve judicial misconduct?	<i>Yes</i>	<i>No</i>
17.9 Does your case involve an analysis of bite marks?	<i>Yes</i>	<i>No</i>
17.10 Does your case involve hair analysis?	<i>Yes</i>	<i>No</i>
17.11 Does your case involve fiber analysis?	<i>Yes</i>	<i>No</i>
17.12 Does your case involve blood analysis?	<i>Yes</i>	<i>No</i>
17.13 Does your case involve gunshot residue analysis?	<i>Yes</i>	<i>No</i>
17.14 Does your case involve fingerprint analysis?	<i>Yes</i>	<i>No</i>
17.15 Does your case involve voice analysis?	<i>Yes</i>	<i>No</i>
17.16 Does your case involve a polygraph examination?	<i>Yes</i>	<i>No</i>
17.17 Does your case involve hypnosis?	<i>Yes</i>	<i>No</i>
17.18 Does your case involve DNA analysis?	<i>Yes</i>	<i>No</i>
17.19 Does your case involve the entrapment defense?	<i>Yes</i>	<i>No</i>
17.20 Does your case involve an alibi defense?	<i>Yes</i>	<i>No</i>
17.21 Were you at the scene of the crime when the crime was committed?	<i>Yes</i>	<i>No</i>
17.22 Does your case involve ineffective assistance of trial counsel?	<i>Yes</i>	<i>No</i>
17.23 Does your case involve ineffective assistance of appellate counsel?	<i>Yes</i>	<i>No</i>
17.24 Does your case involve a victim who has recanted his or her testimony?	<i>Yes</i>	<i>No</i>
17.25 Does your case involve a witness who has recanted his or her testimony?	<i>Yes</i>	<i>No</i>

SECTION XVIII: VERIFICATION

18.1 Did anyone help you fill out this form? *Yes No*

If yes, list contact information of the person who helped you complete this form.

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.'s: _____

How do you know this person? _____

18.2 Do you (the person requesting assistance) agree to allow us to review your information to determine if your case meets our criteria? *Yes No*

I UNDERSTAND BY SIGNING BELOW THAT THE DECISION TO ACCEPT MY CASE WILL BE MADE BY THE INNOCENCE PROJECT OF IOWA. SUBMISSION OF THIS QUESTIONNAIRE DOES NOT CREATE AN ATTORNEY-CLIENT RELATIONSHIP.

Signature of Person Requesting Assistance

Printed Name of Person Requesting Assistance

Dated: _____

The completed form should be sent to:

**The Innocent Project of Iowa
Post Office Box 93
Estherville, Iowa 51334**

All communications must be in writing. The Innocence Project of Iowa does not, and cannot, respond to telephone or e-mail inquiries.