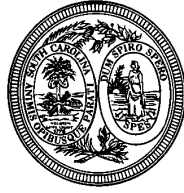


**State of South Carolina**  
**Department of Probation, Parole and Pardon Services**

**NIKKI R. HALEY**  
Governor



**JERRY ADGER**  
Director

2221 DEVINE STREET, SUITE 600  
POST OFFICE BOX 50666  
COLUMBIA, SOUTH CAROLINA 29250  
Telephone: (803) 734-9220  
Facsimile: (803) 734-9440

The Pardon Application has three (3) components: three (3) written letters of reference; information from the applicant and payment of an application fee.

As to the three (3) letters of reference, written by people not related to you by birth or marriage, you must list the name, address and contact telephone number(s) for each of your references. Each reference letter must be signed and dated within the past six (6) months by the writer and specifically state that they are in support of your pardon.

Application forms must be filled out completely, signed and dated by you, the applicant. Be certain to complete the Release of Information section of the application and have it notarized. S. C. Code of Laws 17 -25-322: an offender may not be granted a pardon until all restitution\* has been paid in full. (\*Restitution refers to money ordered by the Court to be paid to victim/victims.) **NOTE:** It will be the applicant's responsibility to attach to the Pardon Application a certified statement from the appropriate authority reflecting that all restitution has been paid in full. If you were not ordered to pay restitution you do not have to complete this part.

A one hundred dollar (\$100.00), non-refundable fee must accompany an Application for Pardon. The fee must be in the form of a money order or cashier's check and made PAYABLE to: The South Carolina Department of Probation, Parole and Pardon Services. If the fee does not accompany the pardon application, the application will be returned to the sender. Mail Application to: SCDPPPS, P.O. Box 50666, Columbia, SC 29250.

The application process is approximately seven (7) to nine (9) months from the time the pardon application is received until a pardon hearing date is scheduled for in-state applicants. The process may take longer for the applicant who is an out-of-state resident. If there are any changes of address or telephone numbers, please call our office to update your information.

If you have any questions, please feel free to contact Beth Anderson at (803) 734-3538.

Sincerely,

A handwritten signature in black ink, appearing to read "Larry Patton, Jr." with a stylized flourish at the end.

Larry Patton, Jr.  
Director of Parole Board Support Services

## South Carolina Department of Probation, Parole and Pardon Services Pardon Application Package

### Pardon Fact Sheet

**Definition:** Pardon means that an individual is fully forgiven from all the legal consequences of his crime and of his conviction, direct and collateral, including the punishment, whether of imprisonment, pecuniary penalty or whatever else the law has provided. An arrest without a disposition cannot be pardoned.

**Guidelines for Determining Eligibility for Pardon:** The Board of Pardons and Paroles shall determine if the individual is eligible for a pardon after reviewing the pardon application based upon the following criteria:

**Probationers:** Probationers are eligible to be considered for a pardon any time after discharge from supervision, provided all restitution has been paid in full.

**Parolees:** Parolees are eligible to be considered for a pardon: 1) Any time after the successful completion of five years under supervision; 2) Any time after the date of discharge of successful completion of the maximum parole period, if less than five years. No person will be granted a pardon unless all restitution has been paid in full.

**Persons Discharged from a Sentence:** Any time after the date of discharge, provided all restitution has been paid in full.

**Inmates with Terminal Illness:** Any time after the inmate is afflicted with a terminal illness with a life expectancy of one year or less. The Board will decide, based upon the application and findings, whether or not the evidence comprises a terminal illness with a life expectancy of less than one year. Two separate doctors' statements documenting life expectancy must be attached to the application. All restitution must be paid in full.

**Inmates:** Any time prior to becoming parole eligible upon proof of the most extraordinary circumstances. The Board will decide, based upon the application and findings, whether or not the evidence comprises the most extraordinary circumstances. All restitution must be paid in full.

### **THE BOARDS' DECISION SHALL BE THE FINAL DETERMINATION OF PARDON ELIGIBILITY.**

**Order of Pardon:** An Order of Pardon shall be signed by at least two thirds of the members of the Board. Upon a favorable consideration by the Board, the Director of the Department of Probation, Parole and Pardon Services shall issue a Pardon Certificate. A pardon order obtained by fraud is void.

**Civil Rights Restored upon Pardon:** A pardon shall fully restore all civil rights lost as a result of a conviction, which shall include the right to: 1) Register to Vote; 2) Vote; 3) Serve on a jury; 4) Hold public office, except as provided in Section 16-13-210; 5) Testify without having the fact of the conviction introduced for impeachment purposes except to the extent provided by rule 609 of the South Carolina Rules of Evidence; 6) Not have testimony excluded in a legal proceeding if convicted of perjury; 7) Be licensed for any occupation requiring a license.

**NOTE:** It should be noted that an individual regains the rights to register to vote and to vote when the entire sentence has been satisfied. S.C Code §7-5-120 (B)(3) provides that a person is disqualified from being registered or voting if he is convicted of a felony or offenses against the election laws, unless the disqualification has been removed by service of the sentence, including probation and parole time unless sooner pardoned.

### **Commonly Asked Questions:**

- 1) Does a pardon clear (expunge) my record? **No. When completing a job application, the conviction should be listed and then indicate that the conviction was pardoned.**
- 2) Does one need a pardon to register to vote or to vote? **No. Once the sentence is fully satisfied, you automatically regain your right to vote.**
- 3) How long will the entire pardon process take? **The application process is lengthy since all the references and information must be verified. On average, it takes about seven (7) to nine (9) months from the time the pardon application is received until a pardon hearing date is scheduled for in-state applicants. The process can take longer for the applicant who is an out-of-state resident. Cases are scheduled in the order in which they are received. If the person who is applying for a pardon has been: laid off or faced with possible job termination pending the results of a pardon hearing, they must so indicate on the application under "Reason for Requesting Pardon," and attach statements concerning the circumstances.**
- 4) Does a pardon clear me from registering as a sex offender? **No, a pardon will not relieve you of the requirements of continuing to register as a sex offender.**

**Mail Application to: SCDPPPS, P.O. Box 50666, Columbia, SC 29250**

**South Carolina Department of Probation, Parole and Pardon Services  
Pardon Application Package**

Present Name		Name Indicted Under	
Social Security #	Date of Birth	Daytime Phone #	Evening Phone #
Street		Reason for Requesting a Pardon	
City	State	Zip Code	

**LIST ALL SOUTH CAROLINA CONVICTIONS** [Do not list parking tickets or minor traffic offenses]  
**THE BOARD WILL ONLY CONSIDER DOCUMENTED CRIMINAL CONVICTIONS AS VERIFIED BY REVIEW OF YOUR CRIMINAL HISTORY. (IE: RAP SHEET INFO)**

Conviction	Date	County of Conviction

**LIST ANY PENDING CHARGES YOU HAVE IN SOUTH CAROLINA**

Offense	Date	County of Offense

**LIST ALL OTHER ARRESTS AND CONVICTIONS NOT LISTED ABOVE [Convictions or pending charges in other states]**  
**FAILURE TO COMPLETE THIS SECTION MAY CONSTITUTE FRAUD AND INVALIDATE ANY PARDON GRANTED.**

Offense	Date	State and County of Conviction

**ADDRESSES FOR THE PAST FIVE YEARS**

Street	City	State

**LIST ALL EMPLOYMENT FOR THE PAST FIVE YEARS** [If retired, student, or unemployed, give beginning/ending dates. Do not leave unexplained gaps]

Company	Address	Phone Number	Beginning Date/Ending Date

# South Carolina Department of Probation, Parole and Pardon Services

## Pardon Application Package

**References:** List three people, not related by blood or marriage, who support your pardon and attach a signed, recently dated statement from each that states their support for your pardon. These people will be contacted concerning your pardon application.

**WRITTEN STATEMENTS FROM THREE (3) REFERENCES MUST BE ATTACHED OR APPLICATION WILL BE RETURNED**

Name	Address	City/State	Contact Phone Numbers

**I meet the pardon eligibility guidelines in that:** [check appropriate box]

- I have been discharged from probation supervision and any or all restitution has been paid in full.
- I have been discharged from my sentence without having been on probation or parole and any or all restitution has been paid in full.
- I am a parolee and have successfully completed five years under supervision and any or all restitution has been paid in full.
- I have been discharged after successfully completing my maximum parole period and any or all restitution has been paid in full.

**Check if applicable:**

- I am an inmate not presently eligible for parole and can produce evidence comprising the most extraordinary circumstances. (Attach a list of the most extraordinary circumstances and the supporting evidence.) Inmates who passed their first parole eligibility date should not apply.  
**NOTE: Any restitution and collection fees must be paid in full on current offense and on any other offense.**
- I was previously considered for pardon and rejected on \_\_\_\_\_ Date
- I, the applicant have attached certified statements from the appropriate authority reflecting that any and all restitution and collection fees have been paid in full.

**General Release of Information**

To Whom It May Concern:

I hereby authorize any agent or other authorized representative of the South Carolina Department of Probation, Parole and Pardon Services bearing this release, or copy thereof, within one year of its date, to obtain any information in your files pertaining to my grievance records, employment, military, credit, medical or educational records including, but not limited to, academic, job performance, achievement, attendance, athletic, personal history, and disciplinary records. I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information will be used in connection with my pardon investigation by the bearer and will be disseminated to those individuals or agencies directly involved in this pardon determination or to fulfill other obligations imposed by law, regulation or executive order. I hereby release you, as the custodian of such records, and any school, college, university or other educational institution, hospital, or other repository of medical records, credit bureau, consumer reporting agency, personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, my family or associates because of compliance with this authorization and request to release information, or any attempt to comply with this release. A photocopy of this release shall be treated as an original. Should there be any question as to the validity of this release, you may contact me as indicated below.

Full Name [Signature]		Full Name [Printed]	
Social Security #	Date	Daytime Phone #	Evening Phone #
		<b>NOTARY</b> (Required by all applicants, seal required if out of state)	
		Sworn to me this _____ day of _____, _____.	
Street		Full Name [Signature]	
		Full Name [Printed]	
City	State	Zip Code	My commission expires:

You are hereby advised the information contained on the pardon application will be verified. If any of it is of a sensitive nature which might lead to the damaging of your current status (such as contacting neighbors, employers, etc.) please advise in order that appropriate steps may be taken to minimize this risk. *NOTE: If applying on behalf of someone else, indicate your authority to file this application.*

**I CERTIFY THAT ALL THE CONTENTS OF THE ABOVE APPLICATION ARE TRUE AND CORRECT.**

Signature	Date
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