

Committee for Public Counsel Services
Innocence Program

Screening Questionnaire: Counsel Referral

The purpose of this questionnaire is to help determine whether the case you are referring qualifies for assistance from the CPCS Innocence Program. The CPCS Innocence Program only represents indigent defendants who have been convicted of a Massachusetts state crime and who claim actual innocence. A person is actually innocent of a crime **only** if he or she did not commit the crime.

This questionnaire seeks information which may be covered by the attorney-client privilege. Please consult with your client before completing this form, and **have your client sign the release on the last page**. If you wish to refer a **closed** case, and no longer have contact with your former client, you may do so without consulting with your former client and without a signed release.

If an open case is accepted by the CPCS Innocence Program, referring counsel may choose to continue to represent the defendant, with the assistance of the CPCS Innocence Program or counsel may choose to have the case reassigned.

Please send the completed questionnaire and any client release to the CPCS Innocence Program, 21 McGrath Highway, Somerville, MA 02143.

1. Defendant's Name _____
2. Date of Birth _____
3. Current Address _____

4. Docket Numbers
a. Trial Court: _____

b. Appeals Court: _____

c. SJC: _____

5. Initial Charges (from indictment or complaint)

6. Conviction(s) including charge(s) and sentence(s). Please include each conviction and the associated sentence. Note if sentences are concurrent or consecutive.

7. Is the defendant still in custody? ___ Yes ___ No

a. If yes, when will the defendant be parole eligible?

b. When will the defendant wrap-up the sentence?

c. If the defendant is not in custody, has the defendant completed serving his or her sentence, or is the defendant still on probation or parole?

8. Has the defendant asserted that he or she is factually innocent?

Yes No

9. Has the defendant, or anyone on his or her behalf, contacted any other innocence program for assistance, such as the New England Innocence Project, or the Innocence Project (New York)? **The New England Innocence Project and the CPCS Innocence Program are separate organizations.**

Yes No

a. If yes, please explain the outcome.

10. Give a brief description of the facts of the case.

11. Was the defendant convicted after a trial or as a result of a guilty plea?

a. If there was a trial, was it a jury or a bench trial?

___ Jury ___ Bench

b. What was the defense at trial?

c. Did the defendant testify? If yes, please give a brief description of the defendant's testimony.

12. If there was a plea, was it an Alford plea.

___ Yes ___ No

a. Has a motion to withdraw the plea been filed?

Yes No

b. If yes, what was the result.

13. Has the defendant had a parole hearing?

Yes No

a. If yes, did the defendant make any admissions or confessions at the parole hearing?

Yes No

b. If yes, please explain.

14. Post Conviction Proceedings.

a. Was a direct appeal filed? Yes No

b. Has a direct appeal been heard? Yes No

c. If yes, has the direct appeal been decided?

Yes No

- d. If the direct appeal has not yet been heard, please explain the current procedural posture of the case (for example, awaiting trial transcription; the defendant's brief has been filed; the Commonwealth's brief has been filed).

- e. If the conviction was affirmed by the Appeals Court, was further appellate review subject?

Yes No

- f. If yes, what was the result?

- g. Has a motion for a new trial ever been filed?

Yes No

- h. Is there a motion for a new trial pending now?

Yes No

- i. If yes, please explain the basis for the pending new trial motion (i.e., ineffective assistance of counsel; newly discovered evidence).

1. Has a petition for certiorari been filed?

Yes No

If yes, what was the result?

15. Is the defendant serving any other (unrelated) sentence(s) Yes No If yes, explain briefly.

16. Is there any question as to the defendant's competency?

b. What efforts have been made to obtain access to the evidence? If a motion has been filed seeking access to the evidence, what was the result?

c. Has any motion for funds to perform forensic testing or further investigate the case been filed?

Yes No If yes, what was the result?

18. What specific assistance are you seeking from the CPCS Innocence Program?

21. If applicable, please provide the following documents with this questionnaire.
 - a. Defendant's appellate brief(s).
 - b. Any appellate decisions.
 - c. Any Rule 30 motion that is currently pending or has been decided, and any Rule 30 decisions.
 - d. Any Rule 30 discovery motions for access to evidence, and/or any motions for funds for investigation, forensic testing, or expert witness fees. Include any trial court rulings, any appeals, and any appellate decisions.

**VI. Authorization for Release of Information and
Communication with Current and Previous Legal Counsel**

I, _____, hereby authorize any
(print your name here)

and all entities and persons, including but not limited to, my current and former attorneys, to release to the Committee for Public Counsel Services ("CPCS") Innocence Program, its staff or student representatives, and/or such other attorney or screening entity as designated by the CPCS Innocence Program, any and all records, files, reports, correspondence, material and information of any kind related to the following case:

_____,
(print trial court docket number)

for which I am seeking CPCS Innocence Program services. I fully understand that there may be statutes, rules, and regulations that protect the confidentiality of some of the records, files, reports, correspondence, material and information covered by this release, and I understand that this release authorizes and directs my current and prior attorneys to disclose information to representatives of the CPCS Innocence Program and/or its designates that may be privileged and/or confidential. This authorization for release of information is made solely to permit the CPCS Innocence Program to evaluate my application for legal representation. Communications with the CPCS Innocence Program are protected by the attorney-client privilege and cannot be disclosed without my permission to anyone other than my prior and current attorneys.

I further understand that the CPCS Innocence Program is currently working in partnership with the New England Innocence Project to identify potentially meritorious innocence claims, and I, _____, hereby give the CPCS Innocence Program authorization, at its discretion, to designate the New England Innocence Project to review my application and to share any materials and information that I provide with the New England Innocence Project for the purpose of screening my case. I understand that, although the CPCS Innocence Program and the New England Innocence Project are two separate organizations, the CPCS Innocence Program may work collaboratively with the New England Innocence Project for the purpose of screening my case and determining whether counsel should be assigned. I further understand that in the event that a decision is made to assign counsel, the assignment will be made by the CPCS Innocence Program to a member the CPCS post-

conviction panel. I consent to have my case screened by both programs, and further authorize the CPCS Innocence Program to release any and all documents, correspondence, pleadings and other information contained in its file to the New England Innocence Project for this purpose. I likewise authorize the New England Innocence Project to release any and all information pertaining to the screening of my case to the CPCS Innocence Program, also for the purpose of screening my case and determining whether to assign counsel.

By my signature below, I represent that this Authorization for Release of Information and Communication with Current and Previous Legal Counsel is voluntary and given without any reservation.

PRINTED NAME

DATE OF BIRTH

SIGNATURE

DATE