

OFFICE OF THE DISTRICT ATTORNEY  
CITY AND COUNTY OF PHILADELPHIA  
**CONVICTION REVIEW UNIT CONSENT FORM**

Commonwealth of Pennsylvania v. _____	CRU Case #: _____ <small>(internal/CRU use only)</small>
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CP-51-CR-_____ - _____	Convicted Offense(s):
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Petitioner's name:

Date of Birth:	Age:	
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Date of Offense:	Date of Conviction:	Date of Sentencing:
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Are there open appeals/PCRA? If yes, please list:

The petitioner must agree to all of the following and indicate such agreement by initialing to the right of each statement.

<ol style="list-style-type: none"> <li>1. I acknowledge that I have been convicted of the offense(s) noted above by the Commonwealth of Pennsylvania.</li> <li>2. I believe that credible evidence of my innocence exists.</li> <li>3. I am requesting that the Conviction Review Unit review my claim of actual innocence.</li> <li>4. I am willing to cooperate with the Conviction Review Unit's investigation.</li> <li>5. I understand the Conviction Review Unit may determine that my case does not meet their criteria and at any point reject my claim.</li> <li>6. I understand that I have no right to appeal a rejection of my claim by the Conviction Review Unit.</li> <li>7. I understand that a claim with the Conviction Review Unit will not extend the deadlines for any PCRA or appellate court claims.</li> </ol>	<p><b>INITIALS OF PETITIONER</b></p> <ol style="list-style-type: none"> <li>1. _____</li> <li>2. _____</li> <li>3. _____</li> <li>4. _____</li> <li>5. _____</li> <li>6. _____</li> <li>7. _____</li> </ol>
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**ACKNOWLEDGMENT BY PETITIONER**

I have read and understand all of the above statements. By initialing the statements and signing below, I understand and agree to comply with any terms herein. No one has told me to agree to anything that I oppose or do not understand. My agreements are of my own free will and are given voluntarily.

DATE: \_\_\_\_\_ NAME (PRINT): \_\_\_\_\_ SIGNATURE: \_\_\_\_\_