

**MIDWESTERN INNOCENCE PROJECT (MIP) AT UMKC
SCREENING QUESTIONNAIRE
(Privileged Information)**

Instructions:

- ! Please respond as fully as possible to each of the following questions regarding your legal case.
- ! Complete and accurate answers will allow us to make better decision about what action, if any, we should take on your case.
- ! Other than a completed questionnaire, DO NOT send any other document to the MIP until we specifically request it.
- ! If you do not understand a question, please write “do not understand.”
- ! If information requested is not applicable to your case, please write NA. If an answer is applicable but you don’t know, please put DK.

Return this form along with your authorization and release form as soon as possible in the enclosed envelope to:

**Midwestern Innocence Project at UMKC
c/o UMKC School of Law
5100 Rockhill Road
Kansas City, Missouri 64110**

NAME: _____

INMATE #: _____ HOUSING UNIT/NUMBER _____

MAILING ADDRESS: _____

1. What is the primary offense for which you are incarcerated? _____

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Your Name _____

2. **Do you currently have an attorney?** _____

a) If so, name, address & phone # _____

Can we discuss your case with your attorney? YES___ NO___

b) Are you aware of any filing deadlines in your case?

c) If so, what deadline and for what action?

3. Contact person(s) outside of prison

a) Name, address, phone, e-mail (if available), relationship

Can we discuss your case with this individual? YES___ NO___

b) Name, address, phone, e-mail (if available), relationship

Can we discuss your case with this individual? YES___ NO___

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Your Name _____

4. Has your case been considered by any other Innocence Project, Defender Program or Community Group? YES___ NO___ If so, provide details (name of group, date of consideration, result).

5. In the space provided below ONLY, please give a summary of the incident(s) for which you were convicted and are currently incarcerated.

6. In the space provided below ONLY, please briefly describe why your case should be taken by the Midwest Innocence Project (MIP).

7. Offense and Conviction

a) Date of incident leading to your incarceration: _____

b) Date of arrest: _____

c) Investigating Detective (name/address): _____

d) Charge(s) filed against you: _____

e) Was anyone else charged in this crime (were there co-defendants)? _____

If so, what happened to them? _____

Please list names of co-defendant(s)

f) Name(s) of Victim(s): _____

g) Date of Conviction and Length of Sentence: _____

h) Place of Conviction (Town, County and State): _____

I) What were you convicted of? _____

j) How much time do you have left to serve? _____

k) Have you previously been convicted of other offenses? _____

If so, please provide dates, charges, sentence and location: _____

1) Do you have any other outstanding charges pending against you? _____

If so, please provide details: _____

8. Information About the Crime and Investigation

a) What was the government's theory of the case (why did they believe you committed this crime?) _____

b) Why do you think the "victim(s)" made complaints against you? _____

c) Did you know the victim? _____

If so, how? _____

d) Do you have an alibi that proves you could not have committed the crime?

YES__ NO__

If "Yes",

1) What is it?

2) Do you have some way to prove the alibi? YES__ NO__

If "Yes", how?

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9) Identification

- a) Did the victim(s) identify you? Yes ____ No ____
- If yes: In a lineup Yes ____ No ____
- From a photo array Yes ____ No ____
- At trial Yes ____ No ____
- Other (explain) Yes ____ No ____

- b) Did anyone else identify you? Yes ____ No ____
- If "Yes," Who? When? Where? What was that person's relationship to you or the crime?

10) Statements and Confessions

- a) Did the police or an investigating detective ever interview you?
- Yes ____ No ____

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Your Name _____

If "Yes",

1) How many times were you interviewed?

2) How long were the interviews?

3) Did you ask to speak with a lawyer during the interview? Yes ____ No ____

b) When was the first time you spoke with your lawyer.

c) Did you sign papers *during* the interview? Yes ____ No ____

d) Did you sign papers *after* the interview? Yes ____ No ____

If "Yes", what did you sign?

e) Did you give a statement/confession? Yes ____ No ____

If "Yes",

1) Who did you give the statement to?

2) Was your lawyer with you when you signed the statement?

Yes ____ No ____

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Your Name _____

3) Was it a written statement? Yes _____ No _____

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

4) Why did you give a statement?

11. Physical/Biological Evidence

a) Was any physical and/or biological evidence recovered during the investigation of your case? Yes _____ No _____

! If no physical and/or biological evidence was found in your case, please go to question 12.

b) Were any bodily fluids or hair samples obtained from the victim? (For example, vaginal swabs, anal swabs, blood, or saliva) Yes _____ No _____

If "Yes", What samples were obtained?

c) Were any bodily fluids or hair samples obtained from you? (For example: blood, saliva, hair) Yes _____ No _____ If "Yes", What samples were obtained?

d) Were bodily fluids or hair found at the crime scene? Yes _____ No _____

If "Yes", What was found?

e) Were bodily fluids or hair found on your clothing? Yes _____ No _____

f) Were any bodily fluids found on the victim's clothing? (For example: blood or semen stains) Yes _____ No _____ If "Yes", What was found?

g) Was any testing done on the bodily fluids or hair samples? Yes _____ No _____
If Yes,

1) What kind of testing was done?

2) Who arranged to have the testing done? Prosecution _____ Defense _____

3) Who actually did the test?

h) Was a second test done? Yes _____ No _____

If Yes,

1) What type of testing was done the second time?

2) Who arranged to have the second test done? Prosecution _____ Defense _____

3) Who actually did the test?

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Your Name _____

I) Was testing done on all of the physical/biological evidence recovered during the investigation of your case? Yes ____ No ____

j) Were the results of the tests used at trial? Yes ____ No ____

If "No", Why Not?

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k) Were the results of the tests used on appeal? Yes ____ No ____

If "No", Why Not?

l) List any item or items of evidence that you think can be subjected to a DNA test [and how that test will show that you are innocent]:

m) Is there any other physical evidence that is still available (other than bodily fluids or hair)? Yes ____ No ____

If "Yes",

1) What is it? Where is it? Who has it?

2) Was it used at trial? Yes ____ No ____

12. Information About Your Trial/Plea

a) Attorneys and Judges

1) Your Pre-Trial Attorney (Name, Address, Telephone);

2) Pre-trial Prosecuting Attorney (Name, Address, Telephone):

3) Your Trial Attorney (Name, Address, Telephone):

4) Trial Prosecuting Attorney (Name, Address, Telephone):

5) Judge(s) (Name): _____

b) Case number: _____

County & State: _____

c) Did you: plead guilty? _____ (If yes, go to Question 13 and fill out the Supplemental Questions at the end of this questionnaire)

Did you: go to trial? _____ (If so, continue)

d) Trial Proceedings

1) Were there any motions filed? (Example: Confession Suppression Hearing; Evidence Suppression Hearing)

If so, describe motion and result:

2) Did the “victims” testify? Yes _____ No _____

3) If someone other than the victim identified you, did that person testify?

Yes _____ No _____

4) Did a co-defendant testify against you? _____

If so, did they receive any benefit for doing so? Explain.

5) Did any other witnesses receive a benefit for testifying against you? _____

If so, who testified and what did they get? _____

6) Who else testified at your trial?

a) For the Defense (include name, address, telephone):

b) For the Prosecution (include name, address, telephone);

7) What was your theory of defense?

8) Did an expert(s) testify for the defense or the prosecution? (For example:

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Your Name _____

doctor, handwriting expert, scientist) Yes _____ No _____

a) Defense Experts (include area of expertise, names, address, telephone):

b) Prosecution Experts (include area of expertise, names, address, telephone):

9) Was any evidence that you (your attorney) attempted to offer kept out of the trial? Yes ____ No ____

a) If yes, explain what the evidence was and why it was refused?

b) Was an offer of proof made to the judge? _____

13. Information about Your Appeal(s)

If you did not appeal, please go to Question 14

a) Attorneys

1) Your Appellate Attorney(s) (Name, Address, Telephone):

Privileged Information

Your Name _____

2) Appellate Prosecutor(s) (Name, Address, Telephone):

b) First Appeal

1) Date of Decision of first appeal: _____

2) What Court heard your first appeal? (provide division, case number and citation if applicable)

3) What legal arguments were presented in your first appeal?

4) What was the result of the appeal?

5) On what date did the court issue its mandate finalizing your first appeal?

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Your Name _____

c) Second Appeal (if any)

1) Date of Decision of Second Appeal _____

2) What Court heard your second appeal? (provide division, case number and citation if applicable)

3) What legal arguments were presented in your second appeal?

4) What was the result of the appeal?

5) On what date did the court issue its mandate finalizing your second appeal?

14. Information about Post-Conviction Proceedings

If you did not file post-conviction proceedings, please go to Question 15.

a) Attorneys

1) Your Post-Conviction Attorney(s) (Name, Address, Telephone):

2) Post Conviction Prosecutor(s) (Name, Address, Telephone):

b) Was a post-conviction petition filed (29.15, habeas corpus petition, PCR: if you do not know what these are, please ask someone to explain this to you)?

1) If so, what type? _____

2) Date filed _____

3) Who filed the petition? You (pro se)____ Attorney ____ Other ____

4) What issues were raised? _____

5) Has the court responded to the Petition? If yes,

a) date decided _____

b) what result? _____

c) cite to reported decision (if any) _____

If additional PCR motions/petitions were filed, please provide information regarding each petition on a separate page and attach to this questionnaire.d)

Have any other proceedings been filed in your case? If so, explain.

e) Have any other attorneys been involved in your case? If so, identify and explain.

15. Proving Your Innocence

a) Is there evidence that was not known when you were convicted and that has not been considered by a court that could now help prove your innocence?

Yes ____ No ____

If “Yes,” please describe the new evidence, how you obtained it, how it is helpful and why it is was not considered at previous trials or appeals:

b) Do you think you know who actually committed the crime for which you are incarcerated? Yes ____ No ____ If so, who do you think did it and why?

c) If you were able to personally prove your innocence, how would you go about doing so?

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Your Name _____

- d) Any other information about your case that we should know? If so, briefly, describe below.

16. Information About You

- a) Date of birth _____
- b) Highest grade completed in school _____
- c) Occupation/Profession before incarceration _____
- d) Work status just prior to incarceration _____
- e) What is your native language? _____
- f) Do you speak any other languages _____
If so, which? _____
- g) Any other information about you that we should know? _____

If so, please briefly describe

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Your Name _____

17. Case Materials

DO NOT SEND ANY MATERIALS WITH THIS QUESTIONNAIRE. If we need materials, we will contact you.

In order to help us evaluate your claim, please indicate what materials are available in your case.

Available from: Comments:

| | | | |
|--|-------|-------|-------|
| Hearing Transcripts | _____ | _____ | _____ |
| Trial Transcript | _____ | _____ | _____ |
| Police Reports | _____ | _____ | _____ |
| Laboratory Reports | _____ | _____ | _____ |
| Appellate Briefs: Appellant (Defense) | _____ | _____ | _____ |
| Respondent (State) | _____ | _____ | _____ |
| Post-Conviction Briefs Petitioner (Defense) | _____ | _____ | _____ |
| Respondent (State) | _____ | _____ | _____ |
| Other: Please describe | | | |
| | _____ | _____ | _____ |
| | _____ | _____ | _____ |

Privileged Information

Your Name _____

SUPPLEMENTAL INFORMATION FOR GUILTY PLEAS

(fill out ONLY if you pled guilty)

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

If "Yes," what did your attorney say to you?

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

3. Did you understand the plea agreement? Yes ___ No ___

a. Did you understand the charges that you were pleading to? Yes ___ No ___

b. What did it mean to you?

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Your Name _____

4. Was the plea in writing? Yes ____ No ____
- a. If the plea was in writing, did you sign it? Yes ____ No ____
- b. If "Yes," was your attorney with you when you signed? Yes ____ No ____
- c. Did you understand what you were signing? Yes ____ No ____
- d. What did you think you signed?

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

6. Did the judge ask if you understood the plea agreement? Yes ____ No ____

7. Was your attorney with you in court when you pled guilty? Yes ____ No ____

8. Why did you plead guilty?

9. Did you attempt to withdraw your plea? Yes ____ No ____

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