

SAN FRANCISCO PUBLIC DEFENDER

JEFF ADACHI – PUBLIC DEFENDER
MATT GONZALEZ – CHIEF ATTORNEY



CLEAN SLATE PROGRAM

HOW TO APPLY:

STEP #1 - FILL OUT FORMS: The “Clean Slate Program Application” and “Application For A Court Appointed Attorney.” can be obtained by calling main office or viewing website.

STEP #2 - OBTAIN A COPY OF YOUR CRIMINAL HISTORY (“RAP”) SHEET

In person: You can get a copy of your San Francisco criminal history record in person at the SFPD Identification Bureau with a valid picture identification card.

By mail: Rap sheets can also be obtained by mailing the \$5.00 fee (**cashier’s check or money order**) and a notarized written request letter for the rap sheet, copies of your state identification and social security cards to the SFPD Identification Bureau. If you need further assistance in obtaining your RAP sheet, please contact us directly.

S F P D Identification Bureau
Hall of Justice
850 Bryant Street
Room 475 - 4th Floor
San Francisco, CA 94103

Open to Public for RAP Pick-Up
Monday - Friday
8:00 a.m. - 3:00 p.m.

STEP #3 - Return all three items: (1) completed application form; (2) completed financial application form and (3) copy of your local RAP sheet to the:

PUBLIC DEFENDER’S OFFICE
Attn: Clean Slate Program
555 Seventh Street, 2nd Floor
San Francisco, CA 94103

Either in person (Monday-Friday 9:00-5:00)
Or by Mail - **Please do not send or leave your application with any walk-in clinics!!!**

Our office is about 1 block away from the Hall of Justice so we suggest that whenever you pick up your RAP sheet you immediately stop by our office and drop your application off with the front desk. You do not need to meet with the attorney to drop off the package and the front desk can make a copy for your records.

Please remember to keep a copy of all documents you submit to us for your own records.

STEP #4 - Once we receive and review your application and rap sheet, you will receive an introductory letter within four weeks letting you know what the next step of the process, depending on which services you are requesting.

PLEASE ALWAYS LET US KNOW ANY CHANGE OF ADDRESS OR TELEPHONE NUMBERS!

If you have any further questions:

- * Feel free to visit our website at www.sfpublicdefender.org
 - * We have **walk-in clinics** in several San Francisco locations (**see attached flyer**)
 - * We can be reached at **(415): 553-9337**
- (Clearly leave your name, phone number and a brief message)**
- * You may also reach us via e-mail at cleanslate@sfgov.org

Adult Division - HOJ
555 Seventh Street
San Francisco, CA 94103
P: 415.553.1671
F: 415.553.9810
www.sfpublicdefender.org

Juvenile Division - YGC
375 Woodside Avenue, Rm. 118
San Francisco, CA 94127
P: 415.753.7601
F: 415.566.3030

Juvenile Division - JJC
258A Laguna Honda Blvd.
San Francisco, CA 94116
P: 415.753.8174
F: 415.753.8175

Clean Slate
P: 415.553.9337
www.sfpublicdefender.org/services

Reentry Council
P: 415.553.1593
www.sfreentry.com

Bayview Magic
P: 415.558.2428
www.bayviewmagic.org

MoMagic
P: 415.563.5207
www.momagic.org

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CLEAN SLATE PROGRAM **How We Can Help Clean Your Record**

EXPUNGEMENT: (Penal Code Section 1203.4):

We can have your conviction dismissed so that when you apply for most jobs, you can legally say that you were not convicted of that crime. To qualify, the following must be true: **(1)** you are not on probation or parole; **(2)** you are not currently charged with a crime; **(3)** you are not currently serving a sentence and **(4)** your conviction is from San Francisco City and County.

A simple expungement takes approximately 3 - 4 months.

SEAL AND DESTROY AN ARREST RECORD: (Penal Code Section 851.8):

To qualify, the following must be true: **(1)** you were arrested in San Francisco City and County **and not convicted**; **(2)** you are factually innocent of the charges for which you were arrested in other words no reasonable cause exists to believe that you committed the offense for which you were arrested; and **(3)** you are seeking this petition within **2 years** from the date of your arrest **unless** you have a valid reason for not requesting to seal the arrest record earlier **and** the prosecutor is not prejudiced by the delay in time. If all three of the above conditions are true, we may be able to seal and destroy the record of your arrest.

A simple sealing and destroying of an arrest record takes approximately 10 months - one year.

CERTIFICATE OF REHABILITATION: (Penal Code Section 4852.01 et seq):

Convictions that resulted in a state prison sentence cannot be expunged. However, you may qualify for a certificate of rehabilitation. Once a certificate of rehabilitation is granted it is forwarded to the Governor's Office as an application for a pardon. To qualify, the following must be true: **(1)** you live in San Francisco City and County; and **(2)** it has been minimum of 5 years to a maximum of 10 years since your discharge from incarceration **or** release on parole or probation.

A simple certificate of rehabilitation takes approximately 10 months - one year.

END PROBATION: (Penal Code Section 1203.3):

If you are still on probation, we may be able to terminate probation and then ask for an expungement. **You must have a very good reason for the early termination**, such as having a job offer that depends on your not being on probation or the early termination was agreed upon at the time of your conviction. Additionally, you must have successfully fulfilled all conditions of probation before requesting early termination.

A simple early termination of probation takes approximately 3 - 4 months.

REDUCE A FELONY TO A MISDEMEANOR: (Penal Code Section 17b)

If you have a felony conviction and are still on probation, we can reduce the felony to a misdemeanor **if there was an agreement** at the time of your conviction.

A simple felony reduction takes approximately 2 - 3 months.

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555 Seventh Street
San Francisco, CA 94103
P: 415.553.1671
F: 415.553.9810
www.sfpublicdefender.org

Juvenile Division - YGC
375 Woodside Avenue, Rm. 118
San Francisco, CA 94127
P: 415.753.7601
F: 415.566.3030

Juvenile Division - JJC
258A Laguna Honda Blvd.
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www.bayviewmagic.org

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www.momagic.org

CLEAN SLATE

2011

CLINIC HOURS

WALK IN CLINICS

Every 2nd and 4th Monday of the month
New hours: 10:30 a.m.-12:30 p.m.
Arriba Juntos
1850 Mission Street

Every Tuesday 9-11 a.m.
Office of the Public Defender
555 7th Street

1st Wednesday of the Month
3-5 p.m.
Up From Darkness
1075 Fillmore Street

4th Wednesday of the Month
3-5 p.m.
Village Community Center
1099 Sunnydale Avenue

1st and 3rd Thursday of the Month
9-11 a.m.
Southeast Community Center
1800 Oakdale Avenue

CLEAN SLATE PROGRAM FINANCIAL APPLICATION
(Required for all applicants)

PLEASE PRINT

NAME:

LAST _____ FIRST _____ MIDDLE _____

Address: _____ City, State, Zip _____

Phone (_____) _____ Birthdate: ____/____/____ Age: _____

Married or Living w/ Life Partner Separated Divorce Single

Are you employed? Yes No What is your ANNUAL GROSS INCOME? \$ _____

EMPLOYER'S NAME: _____ Address: _____

City, State, Zip _____ Work Phone: (_____) _____

I RECEIVE MONEY FROM: Welfare Disability Social Security Unemployment Relatives

TOTAL AMOUNT RECEIVED ANNUALLY: _____

Does anyone contribute to your monthly expenses? Yes No

Who? _____ Monthly Amount(s): \$ _____

Is your spouse employed? _____ SPOUSE'S ANNUAL GROSS INCOME: \$ _____

PLEASE LIST YOUR MONTHLY BILLS:

Amount of Rent/Mortgage/Utilities: \$ _____ Child/Spousal Support: \$ _____ Credit Cards \$ _____

Other Debt: _____ Do you own your own home? Yes No Value of Home: \$ _____

Number of persons you support _____ AMOUNT OF SUPPORT PER MONTH \$ _____

Do you have a bank account?

Yes No

Do you or your spouse own an Automobile, Truck, RV, Trailer, Motorcycle or Boat?

Yes No YEAR/MAKE: _____ APPROXIMATE VALUE: \$ _____

Do you or your spouse have any money coming from Tax Refunds, Lawsuits, Pensions, Trust Funds, an Estate, or any other compensations? Yes No AMOUNT EXPECTED: \$ _____

I declare, under penalty of perjury, that the information provided above is true and correct. I further understand that at the conclusion of my case, the court may order a fee hearing to determine my present ability to pay some or all of the cost to the City and County of San Francisco. If the court finds I have the present ability to pay, I understand I will be ordered to reimburse the courts and the city and county of San Francisco

SIGNATURE: _____ **DATE:** _____