SUPERIOR COURT OF CALIFORNIA, COUNTY OF HUMBOLDT 825 FIFTH STREET EUREKA, CA 95501	*For Court Use Only*
In the Matter of the Application of _____ *Petitioner's full name – First Middle Last and Suffix, if applicable* Date of Birth: CII Number: Criminal Case Number(s):_____	
CERTIFICATE OF REHABILITATION (Penal Code § 4852.13)	CERTIFICATE NUMBER:

The petition of _____, presently residing
Type Applicant's Full Name - First Middle Last and Suffix, if applicable

at _____, requesting a
Type Applicant's Street Address, City, State, and ZIP Code

a Certificate of Rehabilitation pursuant to the provisions of Chapter 3.5, Title 6 of Part 3 of the Penal Code of the State of California, was heard on _____
Date

and proof having been made to the satisfaction of the Court that notice of the time of hearing has been regularly given as required by law; and from satisfactory proof taken at said hearing the Court finds that all allegations of said petition are true, and that the required period of rehabilitation has elapsed since petitioner's date of discharge from custody due to completion of the term to which the petitioner was sentenced, or upon the release on parole or probation on

_____ , that, where appropriate, petitioner has obtained relief pursuant to Penal
Month Day, Year

Penal Code section 1203.4, and that petitioner has demonstrated by the course of conduct his/her rehabilitation and fitness to exercise all the civil and political rights of citizenship (except as provided in Penal Code section 4852.15); and that the that petitioner has been_____time(s) convicted of a felony;
Total Number of Felony Convictions

The Certificate of Rehabilitation is granted. This Court declares the petitioner has been rehabilitated and is fit to exercise all the civil and political rights of citizenship (except as provided in Penal Code section 4852.15), and this Court recommends that the Governor of the State of California grant a full pardon to said petitioner.

Dated:_____

_____ _____
Judicial Officer - TYPED or PRINTED *Judicial Officer - SIGNATURE*

This form was prepared under the direction of the Office of the Attorney General of the State of California