



**STATE OF CONNECTICUT**  
**BOARD OF PARDONS AND PAROLES**  
 55 West Main Street - Waterbury, CT 06702  
**Absolute Pardon Reference Questionnaire**



<b>Applicant's Name:</b>				
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<b>Reference's Name:</b>				
ADDRESS (Number and Street):			Apartment Number / Floor:	
CITY:		STATE:	Zip Code:	
HOME PHONE NUMBER:	BUSINESS PHONE NUMBER:		EXTENSION:	
CELLULAR PHONE NUMBER:	E-MAIL ADDRESS:			

<b>1. What is your relationship to the applicant?</b>
<b>2. How long have you known the applicant?</b>
<b>3. Please list ALL offenses the applicant was convicted of:</b>
<b>4. In <u>detail</u>, please give your reasons as to why you believe the applicant should be granted a pardon.</b>

*You may attach additional pages or a letter to this form, but this form needs to be completed, signed and submitted with the pardon application and any attached letters must be physically signed and dated as well.*

**By signing this form, I understand this form is valid for one year from the date I sign it and agree an employee of the Board of Pardons and Paroles may contact me to verify the information on this form is correct or to obtain additional information if necessary.**

\_\_\_\_\_  
 Signature of Reference (*electronic signatures not accepted*)

\_\_\_\_\_  
 Date

Applicant Last Name: \_\_\_\_\_

Applicant Date of Birth: \_\_\_\_\_