Person Filing:	
Telephone:	
Email Address:	
Representing Self Attorney (Bar No)	
CAREERER CANE OREGIN CONICOLIDATED COLURT (07.67)	CLERK USE ONLY
CAREFREE-CAVE CREEK CONSOLIDATED COURT (0767)	(D) 400 400 1000 (E) 400 FOE 0010
37622 N. Cave Creek Road, Suite B. Cave Creek, AZ 85331	(P) 480-488-1689 (F) 480-595-9610
STATE OF ARIZONA Plaintiff	Complaint/Docket No.
v.	APPLICATION FOR CERTIFICATE OF SECOND CHANCE
Defendant (First, MI, Last)	(A.R.S § 13-905(L))
13-905(L). Defendant is eligible for a Certificate of Second C aside order on in this case that did not include <i>Please note:</i> To qualify for a Certificate of Second Chance, the or 6 felony must wait to submit an application until two yes sentence. Those applicants who were convicted of a class 2 c conditions of probation or sentence. Applicants convicted of a	a Certificate of Second Chance.  nose applicants who were convicted of a class 4, 5, ears after fulfilling the conditions of probation or 3 felony must wait five years after fulfilling the
CONVICTION(S) IN THIS CASE	
A Judgment of Guilt was entered in this Court against the defe on the conviction of:	endant on the day of
Count I:	
Count II:	
Count III:	
Count IV:	

[] Additional counts continue on a separate page.

	Case No.:
I understand that this application may be denied if information in this application is found to be inaccurate.  I declare under penalty of perjury that, to the best of my knowledge, the information provided in this application and any attachments is true and correct.	
Address	
OR	
AUTHORIZATION TO PROCEED	ON BEHALF OF DEFENDANT
I authorize my Attorney,	, to file this application for a
Defendant's Name	Defendant's Signature
To the best of my knowledge, the information provided	in this application is true and correct.
Attorney Name / Bar No.	Attorney Signature
Attorney Address	