

Request for Verification of Good Standing

Requirements to Obtain a Certificate of Good Standing

(Check each box to ensure you meet all of the requirements)

- I have been under the supervision of _____ County within three (3) years of petitioning the Court.
- I have been off of supervision for at least one year prior to petitioning the Court.
- I was not on supervision for a person felony or person Class A misdemeanor.
- I complied with all requirements of my sentence including conditions of supervision and any required treatment or educational programs.
- I have satisfied all court-ordered financial obligations or I am current on a payment plan ordered by the court or a third party as authorized by the Judicial Department.
- There are no criminal charges pending against me.
- I am currently employed, actively engaged in seeking employment, in school or training, or I have a lawful source of support.

Petitioner Information

Last Name		First Name		Middle	D.O.B.
Street Address			City	State	Zip
Phone Number		E-mail Address or Message Phone			
Last County of Supervision		SID Number		Last Probation/Parole Officer (if known)	

Request for Verification

I, _____, the undersigned petitioner, hereby request verification from _____ County Community Corrections, that I meet the requirements to obtain a Certificate of Good Standing. I understand that I must submit a separate form provided by the State Court Administrator, along with the verification provided by _____ County Community Corrections and any other necessary documentation to the Circuit Court in the County in which I reside.

Signature of Petitioner

Printed Name

Date

For Office Use Only

Received by (print name)

Date of Receipt