

IN THE CIRCUIT COURT FOR THE TWENTY-THIRD JUDICIAL CIRCUIT

GENERAL ORDER 14-2

FILED  
JAN 07 2014  
BECKY MORGANEGG  
CIRCUIT CLERK KENDALL CO.

IN THE MATTER OF THE ADOPTION OF )  
PROCEDURES FOR REHABILITATIVE )  
REVIEWS PURSUANT TO 730 ILCS 5/5.5-30. )

WHEREAS, 730 ILCS 5/5-5.5-30 provides that the Chief Judge of each Judicial Circuit shall provide for the manner for rehabilitative reviews; and

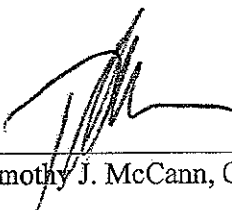
WHEREAS, the Administrative Office of the Illinois Courts has provided forms and guidelines for said proceedings; and

WHEREAS, it is appropriate that the Chief Judge establish procedures for the docketing and hearing of petitions for rehabilitative relief;

THEREFORE, IT IS ORDERED THAT:

1. Upon the filing of a petition for rehabilitative review, the matter shall be docketed on the call of the sentencing judge if that judge is still serving as a judge in the county in which the petition is pending.
2. If the sentencing judge is no longer serving as a judge in the county in which the petition is pending, the petition shall be placed on the call of the Presiding Judge of the county in which the petition is pending. If the sentencing judge is still serving as a judge in the 23<sup>rd</sup> Judicial Circuit, the Presiding Judge shall have the authority to assign the matter to the sentencing judge, with the matter to be heard in the county in which the petition is filed. Otherwise, the Presiding Judge shall either hear the petition or shall assign it to another judge to be heard.
3. A hearing for rehabilitative review shall be conducted pursuant to the attached guidelines.

Entered: January 7, 2014




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Timothy J. McCann, Chief Judge

## Guidelines for Petitions for Rehabilitation Review

### FACTORS TO BE CONSIDERED IN REVIEWING/INVESTIGATING AN APPLICANT'S REQUEST FOR A CERTIFICATE OF RELIEF FROM DISABILITIES

Under 730 ILCS 5/5-5.5-15(c), if a Certificate of Relief from Disabilities is not issued at the time of sentencing, the court may request the probation department to conduct an investigation of an applicant, for the purpose of determining if a certificate shall be issued. The probation officer must prepare and submit a written report to the court in accordance with this request.

Factors to be considered include:

1. Verify that the applicant meets all statutory eligibility requirements pursuant to 730 ILCS 5/5-5.5-5, as follows:

“Eligible offender” means a person who has been convicted of a crime that does not include any offense or attempted offense that would subject a person to registration under the Sex Offender Registration Act, the Arsonist Registration Act, or the Child Murderer and Violent Offender Against Youth Registration Act, but who has not been convicted of committing or attempting to commit a Class X felony, aggravated driving under the influence of alcohol, other drug or drugs, or intoxicating compound or compounds, or any combination thereof, aggravated domestic battery, or forcible felony.

“Felony” means a conviction of a felony in this State, or of an offense in any other jurisdiction for which a sentence to a term of imprisonment in excess of one year was authorized.

For the purposes of this Article the following rules of construction apply:

- (i) two or more convictions of felonies charged in separate counts of one indictment or information shall be deemed to be one conviction;
- (ii) two or more convictions of felonies charged in 2 or more indictments or information, filed in the same court prior to entry of judgment under any of them, shall be deemed to be one conviction; and
- (iii) a plea or a verdict of guilty upon which a sentence of probation, conditional discharge, or supervision has been imposed shall be deemed to be a conviction.

“Forcible felony” means first degree murder, second degree murder, aggravated arson, arson, aggravated kidnapping, kidnapping, aggravated battery that resulted in great bodily harm or permanent disability, and any other felony which involved the use of physical force or violence against any individual that resulted in great bodily harm or permanent disability.

2. Background information on the applicant should minimally include: circumstances of the offense, criminal history, risk assessment, family/living situation, employment history, drug/alcohol abuse, any direct relationship between the current or previous offense(s) and the specific license sought.
3. Information in support of the applicant's request for a certificate should include: reason for seeking a certificate, educational/vocational achievements, certifications, employment endorsements, family/living stability, community involvement, military service/honors, financial stability, and letters of reference/recommendation.
4. Applicants for Rehabilitative Review shall utilize forms which are substantially the same as the attached forms.

**STATE OF ILLINOIS**  
**CIRCUIT COURT OF \_\_\_\_\_**

**Application for Certificate of Relief from Disabilities**

Case Number: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

	Number/Street	City	State	Zip
Code				

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Offense of Conviction: \_\_\_\_\_ Date of Sentence: \_\_\_\_\_

Pursuant to the provision of 730 ILCS 5/5-5.5-15, application is hereby made for issuance of a CERTIFICATE FROM RELIEF OF DISABILITIES to relieve the holder of disabilities or bars of employment herein enumerated:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The applicant hereby affirms that he/she is an eligible offender as specified by the provisions of 730 ILCS 5/5-5.5-5, and agrees to cooperate with an investigation by the probation department to determine his/her fitness for a Certificate of Relief from Disabilities.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STATE OF ILLINOIS**  
**CIRCUIT COURT OF \_\_\_\_\_**

**Certificate of Relief from Disabilities**

Pursuant to the provisions of 730 ILCS 5/5-5.5-15, this certificate is issued to the holder to grant relief from disabilities or bars to employment.

Case Number: \_\_\_\_\_

Name (Holder of Certificate):  
\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

	Number/street	City	State
Zip Code			

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Offense of Conviction: \_\_\_\_\_ Date of Sentence: \_\_\_\_\_

This certificate shall relieve the holder of disabilities or bars to employment herein enumerated:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pursuant to the provisions of 730 ILCS 5/5-5.5-35, this certificate is deemed to be temporary and is subject to revocation for cause. Furthermore, under 730 ILCS 5/5-5.5-45, this certificate shall not be deemed or construed to be a pardon.

This certificate does not guarantee the issuance of a license(s); the holder must comply with all requirements of the licensing agency. The original certificate shall be retained by the holder and a copy will be filed with the Illinois State Police.

Judge's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Copy To: Illinois State Police  
Bureau of Identification  
260 N. Chicago Street  
Joliet, IL 60432

**STATE OF ILLINOIS**  
**CIRCUIT COURT OF \_\_\_\_\_**

**Revocation of Certificate of Relief from Disabilities**

Case Number: \_\_\_\_\_

Name (Holder of Certificate):  
\_\_\_\_\_

Address:  
\_\_\_\_\_  
Zip Code                      Number/street                      City                      State

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Offense of Conviction: \_\_\_\_\_ Date of Sentence: \_\_\_\_\_

Date Certification Issued: \_\_\_\_\_

This certificate of relief from disabilities is hereby revoked for reasons herein enumerated:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pursuant to the provisions of 730 ILCS 5/5-5.5-30(e) and 730 ILCS 5/5-5.5-35, this certificate of relief of disabilities is hereby revoked, and the holder is directed to surrender the certificate to this court. A person who knowingly uses or attempts to use a revoked certificate in order to obtain or to exercise any right or privilege that he or she would not be entitled to obtain or to exercise without a valid certificate is guilty of a Class A misdemeanor. This revocation shall be filed with the Illinois State Police.

Judge's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Copy To: Illinois State Police  
Bureau of Identification  
260 N. Chicago Street  
Joliet, IL 60432



STATE OF ILLINOIS  
CIRCUIT COURT OF \_\_\_\_\_

**Application for Certificate of Good Conduct**

Case Number: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Zip Code                      Number/Street                      City                      State

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Offense of Conviction: \_\_\_\_\_ Date of Sentence: \_\_\_\_\_

State Prisoner/Department of Corrections Number (as applicable):  
\_\_\_\_\_

Pursuant to the provisions of 730 ILCS 5/5-5.5-30, application is hereby made for issuance of a CERTIFICATE OF GOOD CONDUCT to relieve the holder of any employment bar as herein enumerated:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The applicant hereby affirms that he/she is an eligible offender as specified by the provisions of 730 ILCS 5/5-5.5-5. The applicant must meet minimum periods of good conduct and agree to cooperate with an investigation and a rehabilitative review to determine fitness for a Certificate of Good Conduct.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STATE OF ILLINOIS**  
**CIRCUIT COURT OF \_\_\_\_\_**

**Certificate of Good Conduct**

Pursuant to the provisions of 730 ILCS 5/5-5.5-30, this certificate is issued to the holder to grant relief to any employment bar.

Case Number: \_\_\_\_\_

Name (Holder of Certificate):  
\_\_\_\_\_

Address:  
\_\_\_\_\_  
Zip Code                      Number/Street                      City                      State

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Offense of Conviction: \_\_\_\_\_ Date of Sentence: \_\_\_\_\_

State Prisoner/Department of Corrections Number (as applicable):  
\_\_\_\_\_

This certificate shall relieve the holder of any employment bars employment herein enumerated:  
\_\_\_\_\_  
\_\_\_\_\_

Pursuant to the provisions of 730 ILCS 5/5-5.5-30, this certificate is deemed to be temporary and is subject to revocation for cause. Furthermore, under 730 ILCS 5/5-5.5-45, this certificate shall not be deemed or construed to be a pardon. A copy will be filed with the Illinois State Police.

Judge's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Copy To: Illinois State Police  
Bureau of Identification  
260 N. Chicago Street  
Joliet, IL 60432

**STATE OF ILLINOIS**  
**CIRCUIT COURT OF \_\_\_\_\_**

**Revocation of Certificate of Good Conduct**

Case Number: \_\_\_\_\_

Name (Holder of Certificate):  
\_\_\_\_\_

Address:  
\_\_\_\_\_  
Zip Code                      Number/street                      City                      State

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Offense of Conviction: \_\_\_\_\_ Date of Sentence: \_\_\_\_\_

State Prisoner/Department of Corrections Number (as applicable):  
\_\_\_\_\_

Date Certificate Issued: \_\_\_\_\_

This certificate of good conduct is hereby revoked for reasons herein enumerated:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pursuant to the provisions of 730 ILCS 5/5-5.5-30(e), this certificate of good conduct is hereby revoked, and the holder is directed to surrender the certificate to this court. This revocation shall be filed with the Illinois State Police.

Judge's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Copy To: Illinois State Police  
Bureau of Identification  
260 N. Chicago Street  
Joliet, IL 60432