

State of Minnesota

District Court

County

Judicial District:	_____
Court File Number:	_____
Case Type:	Criminal

State of Minnesota,

Plaintiff **Notice of Hearing and**

vs. **Petition for Expungement**

(Sealed Records)

Defendant/Petitioner **Minn. Stat. §609A.03**

Date of Birth

I state under oath that:

I am petitioning the court for expungement (sealing) of a criminal record.

I qualify for an expungement because

- A criminal case against me for a controlled substance violation has been dismissed and the proceedings have been discharged (use Order Sealing Record/Conviction);
- I was certified or referenced for prosecution as an adult for a crime I committed when I was a juvenile (use Order Sealing Record/Conviction);
- A criminal matter was resolved in my favor (use Order Concerning Sealing of Records/No Conviction);

My full name, and all other legal names or aliases I have been known as, are:

My date of birth is:

The following are all of the addresses I have lived at since the date of the offense for which I am seeking expungement:

I am seeking expungement because (include whether expungement is sought for employment or licensure purposes, the statutory or other legal authority under which expungement is sought, and why expungement should be granted):

The details of the offense are (include date and jurisdiction of occurrence, court file number, and date of conviction or dismissal):

The names of the victims in this case are:

Or, there were no identifiable victims.

There is is not a current or prior order for protection, restraining order or other no-contact order prohibiting me from contacting the victims (attach copies of any orders to petition).

Since conviction of this offense, I have taken the following steps toward personal rehabilitation, including treatment, work, or other personal history:

Or, there was no conviction for this offense.

My criminal record including all charges, convictions, stays of adjudication or imposition of sentence and pending actions for misdemeanors, gross misdemeanors or felonies in this state, another state, federal court, or a foreign country, whether the conviction occurred before or after the offense for which expungement is sought, consists of:

Type of Offense	Date of Offense	State/County	File No.	Conviction (Y/N)	Date (If Yes)
-----------------	-----------------	--------------	----------	------------------	---------------

All prior requests for expungement, pardon or sealing of a criminal record, whether for this offense or for any other offense, whether granted or not, that I have made include:

Notice of Hearing

Notice To Law Enforcement/Prosecutor: Any objection to expungement in this case shall be filed with the court as soon as possible, and within 60 days. This matter is scheduled for hearing on
at _____ (time); at _____ (location).

Dated:

Signature *(Sign only in front of notary public or court administrator.)*

Name:

Sworn/affirmed before me this

Address:

_____ day of _____ - -

City/State/Zip:

Telephone: (_____) _____

Notary Public \ Deputy Court Administrator

State of Minnesota

District Court

County

Judicial District: _____
Court File Number: _____
Case Type: Criminal

Affidavit of Service

STATE OF MINNESOTA)
)
COUNTY OF)
(County where Affidavit Signed)

I, _____ (Name of person who mailed the documents), being duly sworn upon oath, state that on _____, I served the attached documents (Notice of Hearing and Petition for Expungement and Proposed Order) by mailing a true and correct copy to the following parties at the following addresses by placing the documents in the U.S. mail in the city of _____ with sufficient postage:

Dated:

Signature *(Sign only in presence of notary or Court Deputy)*

Sworn/affirmed before me this (Date):

Print Name:

Address:

City/State/Zip:

Notary Public/Deputy Court Administrator

Telephone: /