JOE COLEMAN MEDICAL RELEASE HANDBOOK:
A Guide for Incarcerated People, Their Loved Ones, and Attorneys

Illinois Prison Project, Updated September 2023

This handbook is intended to be used for the preparation of Joe Coleman Medical Release Act applications. It can be used by anyone who wants to help a person incarcerated in the Illinois Department of Corrections (IDOC) to file a request for release based on terminal illness or medical incapacitation.

This handbook is intended to be educational only. While we will try to provide as much information as possible about what we know about the Joe Coleman Act (medical release) and its implementation generally we do NOT know the specifics of your situation and the information here does NOT constitute legal advice.

- A note about language: Because this handbook will be used by incarcerated people, their family members, and attorneys, we have called the incarcerated person seeking relief “the applicant” throughout

I. How should I use this handbook?

This handbook provides information about how someone can help an incarcerated person file an application for release under the Joe Coleman Act. You may choose to use this document together with Illinois Prison Project’s Joe Coleman Act Medical Release template. This document provides background information to help you answer all of the questions on that template. You must include the Prisoner Review Board’s medical release application with your submission, which can be found here.

II. What to know before you begin?

What is medical release?

Medical release is a process by which terminally ill or medically incapacitated people can seek to have their sentence ended early. Under the new law, called the Joe Coleman Act, the Prisoner Review Board has the authority to release terminally ill or medically incapacitated people from their prison sentences. The Governor approved this bill in August of 2021 and it took effect on January 1, 2022.
The medical release law is an additional mechanism for release, and does not prevent an incarcerated person from seeking other forms of relief, including clemency, resentencing, or post-conviction relief. People who are terminally ill, medically incapacitated, or have a condition that will make them medically incapacitated are encouraged to apply for medical release even if they have a pending clemency petition or petition for post-conviction relief.

Who is eligible for medical release?

Incarcerated people are eligible for medical release if they are medically incapacitated or have been diagnosed with a condition that will cause medical incapacitation in the next six months, or if they have a terminal illness.

- A person is medically incapacitated if
  - They have been diagnosed with a medical condition that prevents them from completing more than one activity of daily living (like bathing, dressing, or mobility) without assistance or disables them to the point that prison does not create any additional restrictions. The person is only eligible if the medical condition is unlikely to improve noticeably in the future, and if the injury or illness that caused medical incapacitation occurred after sentencing. This definition includes cognitive conditions like dementia.
- A terminal illness is a condition that is irreversible and incurable and, based on an individual assessment by a doctor, likely to cause death within 18 months.

Who reviews and decides on medical release applications?

Medical release applications are filed with the Prisoner Review Board. A physician from the Department of Corrections, or working with the Department of Corrections, will have to certify that a person is eligible for release—for example, that they are terminally ill or disabled—before the petition will be considered by the PRB. Once IDOC determines that the applicant is eligible for medical release, a three member panel of the PRB will both hear and decide the outcome of the application. The Governor does not make a decision regarding any medical release application.

How quickly will the PRB decide?

The Prisoner Review Board docket medical releases as they are filed; unlike in clemency, there are no filing deadlines. Medical release decisions should be made within 90 days of when the application is filed.

Under the Crime Victim’s Bill of Rights, any registered victim has the right to provide input to the PRB before a decision is made; that means that if there is a registered victim in the applicant’s case, no decision can be made until the victim has been notified of the application
and been given 30 days to respond. This will not extend the process beyond the 90 days set forth in the law, but may mean that an emergency application cannot be decided for at least 30 days.

III. What to do before you begin?

Before you begin, make sure that you have a plan for how you will finalize and send the application.

The Prisoner Review Board requires that their application be included in the filing; you will need to either type your responses into their PDF application, or print it out and write in your answers. If you are using IPP’s Joe Coleman Act Template, you should submit that in addition to the PRB’s application. The PRB’s application can be found here. You will also need to gather additional documentation, such as medical records and letters of support. After you have gathered the documents, you will need to organize them into a single package to be mailed or faxed to the PRB.

IV. What information will I need to include in the Medical Release Application?

**Required Information**

The PRB requires that all medical release applications include the following information, included in their application.

1. **Applicant’s Personal Information:**
   - Full name
   - Holding Facility
   - Date of Birth
   - Place of Birth
   - Any aliases, including the applicant’s maiden name or married name if they are different from their name right now.
   - Social Security Number
   - State Prisoner Number
   - If there has been any Prior Clemency Request (month and year of consideration, if you know)
   - Any prior medical release requests (including application number and date of denial)

2. **Information about the Convictions for which Medical Release is Sought**
You’ll include information about any active sentences. To determine if a sentence is active, ask your counselor, or have a loved one check the “Individuals in Custody” page on the Illinois Department of Corrections website. If a sentence is active, a red “NO” will appear under the docket number next to the word “Discharged.”

- Offense of Conviction*
- Case Number*
- County of Conviction*
- Applicant’s Version of the Offense: This question requires a longer answer than some of the other questions. If you are supporting a person in prison, you will need to work with them to help them provide a detailed statement about what happened in their case. This includes dates, places, and all surrounding circumstances. If you have them available, it is helpful to include court documents that reflect the official version of events, especially if they are generally consistent with the applicant’s version. Examples of documents that might include an official version of events are a Rule 23 order, appellate opinion, plea transcript, sentencing transcript, or State’s Attorneys’ Statement of Facts. Unless there is a compelling innocence claim, most attorneys recommend that a person filing for medical release both accept responsibility for the offense and express remorse.

3. Diagnostic Medical Criteria

You will be asked to check one of three boxes on the PRB’s medical release application. You can check more than one box depending on the applicant’s medical condition. Remember, medically incapacitated means that they need assistance with at least two activities of daily living (eating, getting into/out of bed or chair, toilet hygiene, bathing or showering, getting dressed, personal hygiene, walking/climbing stairs, safety/emergency response).

Check one of the following boxes on PRB’s form, or all that apply:

- Applicant is suffering from a terminal illness that is likely to cause death within 18 months
- Applicant has been diagnosed with a medical condition that will result in medical incapacity within the next six months
- Applicant has become medically incapacitated subsequent to sentencing due to illness or injury

Importantly, although the formal application does not require it, you should include information about the applicant’s medical (physical or cognitive) condition, and include copies of any medical records that support your claim. The applicant is entitled to a copy of their medical records from their institution. Medical records can be difficult and time-consuming to obtain.
Asking for a copy of the “Problem List” and current medications may provide enough information to reflect the applicant’s medical situation. You can find more information about how to request medical records from the institution in the “Frequently Asked Questions” section at the end of this toolkit. You will want to include the following information:

- Diagnosis (the specific illness or injury) and prognosis (the way the disease or injury progressed, the way it is likely to progress, and any likelihood of recovery).
- Any and all medications, recent surgeries, specialized treatments, etc. If in doubt, include more health-related information than less.
- Any ways that the applicant’s health conditions impair their mobility, strength, or theoretical ability to reoffend.
- Any accommodations they currently receive. Examples include wheelchair permit, bunk or lower gallery permit, assigned aid, and placement in the permanent infirmary unit.
- If the applicant has complicated medical needs, be sure to address how they will be addressed and cared for in the community. For example, if the applicant needs a wheelchair, be sure to note that any proposed housing has a ramp, elevator, or other accommodation.

INCLUDE: a limited number of medical records that reflect the applicant’s diagnosis, prognosis, disease progression, and impact on activities of daily living (i.e. lower bunk permit, wheelchair permit, aide).

4. Parole Plan

You will be asked to provide host site information. Host sites are either private residences or facilities (like nursing homes, transitional housing, or other managed facilities). You will also be asked if the applicant will accept a placement secured by the Department of Corrections, should the proposed placement not work out.

- If the parole site is a private residence, please include:
  - Name of homeowner or leaseholder
  - Address
  - Phone number
  - Relationship to the applicant
  - Indicate whether someone at the residence will be able to care for the applicant
- If the parole site is a facility, please provide:
  - Name
  - Address
Optional to include: Letters of support from people in the community are very important, and you should include as many as you can. A template is included at the end of this handbook. Applicants can also request other incarcerated people, prison volunteers, or prison staff can be attached to the application.

Recommended Information

The PRB recommends that you include the following information. If you are using IPP’s Template, you’ll see a place to include this information. We strongly recommend that you include the following information to give the PRB a deeper understanding of the applicant as a person. Before you begin, however, you may want to go down this list and make sure you have all this information.

You should include supporting documents wherever possible. We’ve included examples of supporting documents in italics at each section.

a. Applicant’s Personal Life History
This information should be written out like a story. The more details you can include about the applicant’s life before his or her incarceration, the better. Below are some topics that you might address in this section to develop a full life history. A successful application will help the PRB understand what the applicant’s life has been like, especially any struggles or hardships they have been through:

● Childhood:
  ○ What was the applicant’s childhood like?
  ○ Was there enough food and money for the family to be comfortable, or were basic necessities a struggle?
  ○ Did the applicant grow up in a neighborhood where they felt unsafe, whether from violence, drugs, or trouble at home? Was the applicant ever abused—physically, verbally, or sexually—as a child, or did they witness that abuse of someone else?
  ○ Did they become a parent at a young age (before 18)?
  ○ When did they leave home? Why?
  ○ Were they homeless as a child or teenager?

● Employment History:
  ○ Where did the applicant work, and for how long? Include as much information you can about each position, including title and pay rate. Please not if the applicant particularly enjoyed or excelled at any position.

● Hardships and Violence as an Adult:
  ○ Did the applicant experience hardships as an adult? For example, did they experience any abuse in their relationships, such as being beaten up by a partner or spouse?
Were they the victim of violence outside of the home, such as community violence or gang violence?
Were they ever the victim of violence against them because of who they are (for example, because of their sexual orientation)?
Were they in any serious accidents that caused serious or permanent, or life-threatening injuries?
Were they the victim of physical, emotional, or sexual abuse?

b. Educational History
- Where did the applicant go to school?
- Did they excel academically, or struggle in school?
- Were they in special classes, or did they have a learning disability?
- How far did they get in school?
- If they did not graduate, why not?
- Did they play sports, participate in clubs, or any other extra-curricular activities as a child?

c. Marital Status
- The PRB requests information about marital status, but please include information about any life partner, even if not formally married.
- Please describe the applicant’s relationship with their partner, including how and when they met, whether they live together, and any stories that might help the PRB understand their relationship.

Optional to include: Photos of applicant with their partner, letters from partner in support of release, a description of any health or other formal benefits (i.e. health insurance, dental insurance, disability insurance) that the applicant might receive through their partner if released.

d. Names and Ages of Children
- Please describe the applicant’s children, including ages, names, and details about the applicant’s role as an active and loving parent.
- Please describe other family members or loved ones who support or play a major role in the applicant’s life, including the applicant’s relationship with them. Examples include siblings, nieces/nephews, grandparents, etc. The purpose of this section is to show how much support the applicant has in the community, and how important the applicant’s release is to their loved ones.

Optional to include: Photos of the applicant with their children and/or family members, letters from their loved ones in support of release.
e. Substance Abuse and Mental Health Information
   ● Drug or Substances
     ○ Does the applicant have a prior history of drug or alcohol use that might explain their involvement in the criminal justice system?
     ○ If so, please describe when the applicant began using substances and any factors that contributed to the applicant’s substance use, e.g. injury from an accident, peer pressure, gang involvement
     ○ If the applicant’s substance use played a role in the instant offense (e.g. if the applicant committed a robbery to sustain a drug habit), describe the applicant’s substance use around the time of the offense, including frequency of use, quantity, and drug(s) of choice.
     ○ Please describe any drug or alcohol treatment the applicant has participated in, or any independent efforts the applicant has made to address their substance use. If the applicant has not been able to obtain treatment, please plainly state that fact.
   ● Mental Health History
     ○ Does the applicant have any prior mental health diagnoses, especially if they are now being successfully treated through medication or therapy?
     ○ If so, when were they first diagnosed, hospitalized, and/or treated? Describe the impact the applicant’s mental health diagnosis or symptoms have had on their life.

INCLUDE: Any certificates or awards for the completion of substance abuse or mental health courses, a limited number of mental health records.

f. Military Records and/or Awards
   ● Did the applicant serve in the military?
   ● What was their highest rank?
   ● Did they especially enjoy or detest any portion of service? Why?
   ● Did they receive special training or recognition?
   ● Where did they serve?
   ● Were they in combat?
   ● Were they injured?
   ● How did serving them affect them?
   ● Did they struggle to return back to civilian society?
   ● Did they suffer long-term side effects related to service, such as PTSD?

INCLUDE: DD214, commendations, any other awards, documentation confirming V.A. benefits
g. Degrees or Diplomas (earned or anticipated)
   - This section asks for the same information as “Educational History,” but emphasizes how important it is! Please emphasize any educational courses the applicant has finished or is pursuing, both before entering prison and during incarceration
   - Please also note any programs the applicant is hoping to take while in prison! Please note whether the applicant is or was on the waitlist for any courses, programs, or other educational or vocational training.

   INCLUDE: Any degrees or diplomas, transcripts, graded assignments, notes from staff indicating that an application’s request to enroll in a program has been received.

h. Awards or Commendations
   This section is duplicative of other sections, but emphasizes that the PRB will likely consider the applicant’s life and history of rehabilitation as a whole, even though the primary consideration should be the applicant’s medical condition

   INCLUDE: Proof of any awards or commendations. If the original document has been lost, a letter from the person who recognized the applicant (i.e. supervisor, employer, correctional officer/counselor) acknowledging the commendation is a good substitute!

i. Counseling or Rehabilitation Programs you have Attended or Completed
   This section is duplicative of the mental health section, but really emphasizes how important rehabilitation is to the PRB. Remember to think broadly about this section: anger management, group counseling, parenting classes, and many other courses offered by the Department of Corrections fall under this category. Similarly, informal group sessions like Bible study might also be considered to be a rehabilitative program.

   INCLUDE: Proof of any participation and completion of any counseling or programming, which often come with certificates of completion. If the original document has been lost, simply list and describe the programs—informal or formal—that the applicant participated in. Proof of group and individual counseling can often be found in an applicant’s mental health records.

j. Licenses or Certifications
   - Talk about any licenses or certifications that the applicant received either before or during incarceration. For example, if the applicant earned their barbering license while in prison, or if they become certified as an AIDS Peer Educator, talk
about when they earned that license or certification, how much work went into it, and how they’ve put that license or certification to use.

INCLUDE: Proof of any licenses or certifications, or transcripts from coursework that went into that license or certification.

k. Life Changing Events
This may be covered in earlier categories, but it is very important to give PRB a sense of the person the applicant has become during the course of incarceration. If possible, the application should show the PRB the ways in which the applicant has become rehabilitated over the course of their incarceration.

- Please describe the applicant’s life during incarceration.
- What hobbies do they have? How do they fill the time?
- If they are religious, describe the role religion has played in their life during incarceration?
- Have they formed meaningful relationships with other incarcerated people? Have they become a mentor or source of support? Consider asking other incarcerated people for letters of support.
- If the applicant has had a work history while incarcerated, describe the jobs they held and any details about them. Did they especially enjoy a particular job? If so, why? Consider asking supervisors for letters of recommendation.

INCLUDE: Disciplinary card if it shows minimal infractions, examples of the applicant’s hobbies (i.e. art, poetry, essays, photographs), letters from incarcerated friends or correctional officers

V. How to Submit the Application

Signature
Whoever files the application (e.g. applicant, family member, representative, physician, or attorney) must sign it, and must include the following language:

“I declare under penalty of perjury that all of the assertions made in this petition are complete, true, and accurate.”

Examples of what this looks like in context can be found on IPP’s Sample Joe Coleman Application and Template.
You may file the application by email, fax, or the mail. If you are able to have a loved one email your application for you, email is the quickest way to ensure rapid processing.

- To file by email (through a loved one):
  - Send a pdf copy of the application to PRB.MedicalRelease@Illinois.gov. All documents must be included as a direct email attachment (e.g. PDFs) and must be in legible form.
- To file by fax (through a loved one):
  - Fax a copy to (217) 524-0012, Attn: Medical Release Act
- To file by mail:
  - Mail a copy of the completed application to: Prisoner Review Board, Attn: Medical Release Act, 319 E Madison St A, Springfield, IL 62701

VI. Docketing

Once a petition is received by the PRB, they will reach out to IDOC to have a physician certify that the applicant is eligible for release; specifically, that the applicant has a diagnosis or condition that renders them terminally ill or medically incapacitated.

Once the IDOC physician has certified that the applicant is eligible for medical release, the application will be placed on the PRB’s docket for a decision. If the physician says that the person is not eligible, the application will not be placed on the PRB docket, although the PRB will retain the application for 60 days in case something changes with the applicant’s medical condition.

VII. Hearing

Applicants are entitled to a public hearing, which takes place virtually on an internet platform called WebEx. Unfortunately, the PRB is not currently allowing incarcerated people to attend medical release hearings, even if they are the applicant.

Up to four witnesses can appear at the hearing. Putting a “face” to the application is extremely important; for that reason, if the applicant has loved ones who are able to appear at the hearing, we highly recommend requesting a public hearing. Witnesses can help the PRB understand the severity of the applicant’s illness or condition, ways in which the applicant has changed or grown during their incarceration, and the ways in which they will support the applicant if the petition is granted.

VIII. Release
If the application is granted, the PRB will notify IDOC, who will confirm the applicant's release plan and then release the applicant. If the applicant does not have a release plan in place—for example, if they need nursing-home level care and a bed has not yet been secured—IDOC will work to find an appropriate placement.

People granted medical release will have to serve five years of Mandatory Supervised release, or a term of MSR equal to the remainder of their original sentence and MSR term, whichever is long.

**Frequently Asked Questions**

1. **Will there be a hearing on the application?**
   There will be a hearing on the application if you request one. Please remember that if you request a hearing, that may cause a delay in obtaining a decision (although the PRB should rule on the application within 90 days). Incarcerated people are unfortunately not permitted to attend hearings.

   Currently, the PRB is holding institutional hearings virtually over a platform called Webex, which is similar to Zoom. Up to four witnesses may appear on behalf of the applicant at the hearing. Hearings are open to the public, meaning that anyone can watch the hearings online (but not participate) if they register in advance. Once a hearing date has been set, your loved ones can register through the PRB website: prb.illinois.gov

2. **What happens to my application once it’s been filed?**
   Your application will be placed on the medical release docket, and the applicant (or whoever filed the application) will receive a letter with a docket number. The date that the applicant submits the application will govern when the applicant’s hearing will take place (if requested) and when the application will be considered by the Prisoner Review Board. There are no filing deadlines and no pre-set hearing dates.

   Once the application has been considered by the Prisoner Review Board, either after a requested public hearing or without one, the Prisoner Review Board will make a final decision.

3. **When will I hear if the application is granted?**
   Applicants and/or their representatives will be notified of the PRB’s decision as soon as it is rendered.
4. What happens if the application is granted?
   If the application is granted, the applicant’s sentence will be discharged and they will be placed on a term of mandatory supervised release (MSR) for up to five years. Field Services, a unit within the Department of the Corrections, will verify the applicant’s parole plan. If the parole plan is approved, the applicant will be released.

   If the parole plan is not approved, Field Services will work to identify an acceptable placement, including a nursing home placement. Someone in the institution will tell the applicant that his or her sentence has been commuted, and Field Services will begin working with the applicant to verify his or her release plan.

5. What happens if the application is denied?
   If the application is denied, the applicant will not be released. Although the statute itself does not require applicants to wait before re-filing, the PRB’s guidelines state that applicants who have had an application denied must wait six months before re-filing.

6. Our application was denied less than a year ago. Can we still file?
   You may refile within six months if you can demonstrate a change in the applicant’s health or situation that may now make them eligible by emailing the PRB at PRB.MedicalRelease@Illinois.gov or mailing a letter requesting permission to refile before the end of the 6 month waiting period.

7. Does the application need to be notarized?
   No.

8. How do I get medical and/or mental health records from the Illinois Department of Corrections?
   The applicant is entitled to a copy of their medical records from the Department of Corrections. The fastest way to get their records is to have the applicant request them from the prison’s Medical Records department. If people outside of prison need those records to help create a petitions, the applicant can mail them directly to you. For a snapshot of the applicant's medical history, ask for their “Problem List” and current medications, both of which they can obtain from Medical Records.

   If a person outside of prison would like to request them from the Department of Corrections yourself, the applicant must first sign the Department of Corrections release form. The signed forms must be faxed or mailed back to the applicant’s correctional institution. Because each institution has different rules about how to
submit medical records requests, people outside prison should call the institution and ask to speak to “Medical Records” for guidance from the applicant’s institution.

9. The applicant received medical and/or mental health treatment at an outside hospital while incarcerated. How do I get medical and/or mental health records from them?
   You are not required to include medical records. You may have copies of your medical records from outside providers already. If you do not, you can ask your providers for copies, or for the health care administrator at your institution to give you copies.

   If you need to obtain medical records from a community hospital or provider and are working with a loved one to do so, your loved one will need explicit permission from the applicant. First, they should identify the provider, call the medical records department where you received care, and ask for a copy of the provider’s HIPAA release form. They can also typically find this form on the provider’s website. Once they have a copy of the release, they should work with you to fill it out to allow the provider to release your medical records to them or directly to you. Your loved one should be prepared to pay a small fee for medical records from providers.

10. If the applicant has to register as a Sex Offender, are there restrictions on where they can live if they are released?
    There are housing restrictions for sex offenders where the victim was a minor. It is unlawful for a child sex offender to reside within 500 feet of a school, playground, or any facility providing programs or services exclusively directed toward people under age 18, unless the person obligated to register owned the property prior to July 7, 2000.

    Although there are no formal restrictions on sex offenders living with children under the age of 18, the Department of Corrections is unlikely to approve a parole site where children live. If the applicant is required to register as a sex offender, it is a good idea to identify a parole site where there are no children.

11. Where can I find the information about the applicant’s current and/or previous cases (i.e. judge, sentencing date, etc.)?
    The applicant’s previous and current cases that resulted in a prison sentence will be listed on IDOC’s website, and will include the county of conviction, offense, case number, and sentencing information. You can look at that information here:
The Department of Corrections website will not include information about convictions that did not result in a prison sentence in Illinois. Thus, it will not include convictions from other states, or convictions in Illinois that resulted in probation. The applicant should be able to provide information about those kinds of convictions.

- For example, the applicant should be able to tell you that they were convicted of a robbery in Milwaukee in 1994. You could then contact the clerk in Milwaukee County to obtain that conviction.

If the applicant was convicted in a county outside of Cook County, you may be able to find additional information through this website, which provides access to the clerk systems in many counties outside of Cook County: https://www.judici.com/. Unfortunately, Cook County does not provide general public access to this information online.

12. What if the applicant is serving a sentence for multiple cases out of multiple counties?
   Please include all current, undischarged sentences in the Offenses of Conviction section.

13. How can I find out if the application was received by the Prisoner Review Board?
   To check to see if an application was received, you should contact the PRB directly at 217-782-7273.

14. Is there anyone or any type of offense NOT eligible to file a medical release application?
   No. Anyone serving a sentence for a conviction imposed in Illinois may file a medical release application.

15. Can the Illinois Prison Project review our application before we file or can IPP file on our behalf if we compile everything?

Unfortunately, due to the sheer volume of requests, we cannot review every application prior to filing. IPP hosts a regular drop-in legal clinic via Zoom twice a month, which is an opportunity to ask questions and speak one-on-one with one of our staff attorneys. Our legal clinic is held on the 1st Tuesday of each month from 4 pm - 6 pm and the 3rd Saturday of each month from 9 am - 11 am. Fill out this form to register for the clinic: https://forms.gle/347QAcmvBy3zTMTn7
How to Write a Letter of Support for a Clemency Case

Letters of Support help show that you have family and friends who love and care about you and who are ready to help you reenter society successfully, such as by providing housing or help finding a job.

Who can write a letter of support? Family members and friends are the best people to write letters, including important friends of the family, such as your pastor or other religious leaders. Children, especially the person’s own children, can write letters or draw pictures. Even if they cannot write very much, they can just say how much they miss their parents or family members.

How long should the letter be? People should just say whatever they want to say, and talk about whatever is most important to them. Don’t worry about it being too long or too short. Even a very short letter is a good letter!

What are the most important things to say in a letter of support?

1. **Who is the person writing the letter?** They should say their name, profession, if they are retired, or if they are a parent or caretaker.

2. **How do they know you?** Are they related to you? Did you raise them? Did you grow up together? How often do you stay in touch with them during your incarceration? Do you write or call them in prison? Can they talk about what you were like before incarceration? What kinds of things did you enjoy doing? Can they write about any challenges you had growing up? Can they discuss if you had a difficult home life? Can they write about the kind of person you are now? Can they talk about the changes in your life?

3. **How will they help you if you are released?** This may be the most important section! They should talk about how they would help you if you are released. For example, will you live with them? Will they help make sure you get to medical appointments? Will they help make sure you stay sober and attend AA? Will they help you find a job?

Is there anything they should not say in the letter? Most importantly, everything they say should be true and from the heart. Also, filing a clemency petition is NOT like being in court. It is **not** helpful to say that the person is innocent. Do not discuss the facts of the case. Instead, the Governor wants to know that they have friends and family who care about them and who will be able to support them if released.

Can their letter be handwritten? Yes! But please write legibly.

Must they include their address? They ideally should include their address as part of verifying their identity.
**SAMPLE MEDICAL RELEASE LETTER:**

[DATE]  
Prisoner Review Board  
319 E Madison St A  
Springfield, IL 62701  

Dear Prisoner Review Board,

My name is Esther Good. Amanda Good is my niece. I have known her since she was born. Ever since she was little, she wanted to help others. I remember as a little girl she always tried to help me in the kitchen, even when she was too small to be much help. But I did love the company. We didn’t have a lot of money when Amanda was a child, but we made do.

When Amanda was a teenager, she was raped by some older boys. After that, she started having a hard time in school. She would come home from school and I knew she was high. I think she was trying to deal with what happened to her and she didn’t know how to do it. She struggled a lot and she lost her way.

Amanda has a family who loves her very much. We are a very close family and we take care of our own. It broke my heart when Amanda was arrested. Since then, I write her letters and call her on the phone about once a week. I put money on her books whenever I can. I cannot believe it has been this many years. She is sorry and we all are. But since she’s been in prison, I have seen the change in Amanda. She’s gotten sober and that helped a lot. She’s thinking clearly now and she wants to help other people in their sobriety.

We were all devastated when she was diagnosed with cancer. If Amanda is released, she will be staying with my sister, Eden Good, who is Amanda’s mother. I used to be over at my sister’s house just about every day because Eden and I work together helping people with their taxes. If she is released, I will be helping to care for Amanda. My schedule is flexible, and I will stay with Amanda every morning. I will also help Eden take Amanda to medical appointments, bathe, and dress Amanda. We have already made modifications to Eden’s home to make it wheelchair accessible. I want nothing more than to be with her during her final days.

Amanda is a person who has made mistakes, but she is a good person. She is kind and loving. She cares about other people, especially her family. I know she wants to help her mother and me as we get older. Please find it in your heart to grant her clemency.

Sincerely,
Ms. Esther Good
1234 Sample Street
Chicago, IL 60603
(312) 555-5555

Medical Release Application Checklist

Underlying Offense
☐ Description of underlying offense, including county and date sentenced

Medical History
☐ List current medications
☐ List prior medical conditions
☐ Describe terminal illness or medical incapacity
☐ Attach relevant medical records

Parole Plan
☐ Place to live
☐ If required to register as a sex offender, confirm and note there are no children in the home and that it is more than 500 feet from a school, park, playground, etc. ☐
 Describe your plan for medical care in the community
☐ Describe your plan for financial support

Institutional Adjustment
☐ Highlight classes, certificates, diplomas, and other accomplishments

Personal History
☐ Childhood
☐ Education
☐ Military history
☐ Job history (in and out of prison)
☐ Marriage/Children

Attachments
☐ Letters of Support
☐ Medical Records
☐ Accomplishments in Prison
☐ Disciplinary Cards
☐ Photographs

Submission
☐ Signed by applicant (under penalty of perjury)
☐ Request or waive right to a public hearing
Include PRB’s medical release application
- Emailed, faxed, or mailed to PRB