



California's Protection & Advocacy System  
Toll-Free (800) 776-5746

# PETITION FOR A STATE WRIT OF HABEAS CORPUS – CIVIL AND FORENSIC COMMITMENTS

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*December 2017, Pub #5111.01*

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A Petition for Writ of Habeas Corpus is a relatively fast and easy way to get a judge to decide an issue regarding either your rights in a hospital/detention facility (conditions of confinement) or the legality of your confinement. These forms and instructions are for filing a Petition for Writ of Habeas Corpus in California state courts.

## **I. PREPARING THE PETITION**

### **General Considerations**

- 1) Read the entire form and these instructions before filling out the form.
- 2) Decide if you want to file the Short (MC-265 or MC-270) petitions or the Long (MC-275) Petition for Writ of Habeas Corpus form. The MC-265 petition form is for people who are being held under the Lanterman Petris Short (LPS) Act (Cal. Welf & Inst. Code (WIC), § 5000 et seq.), which includes being held under WIC §§ 5150, 5250, 5350, etc. The MC-270 petition form is for people who are being held on civil commitments, which includes being held under Penal Code §§ 1026, 1370; WIC § 6600, etc. The MC-265 and MC-270 petition forms are short and can make filling out the petition easier if that form applies to your situation. The MC-275 petition form can be used by any person challenging their detention or the conditions of their detention in a facility, whether they are being held through the LPS Act, civil commitment codes, or penal codes. The MC-275 petition can be used by any person being held under detention and has more detailed questions. This form allows for more explanation and argument against detention or conditions of detention you are faced with. Depending on your issue or your personal preferences, one form may seem better to you than the other at presenting or explaining your issue(s) to the court. Only fill out one of the three petition forms.
- 3) Fill out the form as clearly as possible in black ink, if possible, or by typing your answers. Take your time when filling out the form. It might be a good idea to practice on a blank sheet of paper first.
- 4) If you don't have enough space to answer a question, finish your answer(s) on (an) additional page(s) and attach them to the back of the petition form. Note on the petition form that your answer is "continued on additional page(s)."

- 5) Attach copies of any documents which support your claim or which the court will need in order to understand your claim. For example, if you were put in restraints without sufficient grounds, you might wish to include the copies of any complaints you've filed or copies from your medical chart. It is important to do this because the court may deny your petition if it does not have enough evidence.
- 6) Normally you must have "exhausted your administrative remedies" (finished the patients' rights complaint and appeals process at your hospital, or the grievance/complaint and appeals process at your place of detention) before a court is willing to hear your petition.
- 7) There is no filing fee for a habeas corpus petition in state court. However, you may have to pay fees if the court appoints an attorney to represent you, or if an expert witness is required. There is a form to request a waiver of court fees if you cannot afford those expenses.

## **II. FILING THE PETITION**

In the Superior Court, all you are required to do is send the original to the court clerk. It is advisable to send a second copy with a stamped self-addressed envelope so that the court can return a stamped copy to you, showing the case number and when it was filed. If you are challenging an order of commitment and are filing a petition in Superior Court, you should file it in the county that made the order. If you are challenging the conditions of your confinement and are filing a petition in the Superior Court, you should file it in the county in which you are confined. At the Court of Appeal level, if you are not represented by an attorney, you only need to file an original, but at the Supreme Court level you must file an original and ten copies. Addresses for the superior courts for the counties where each of the five state hospitals are located are included at the end of this packet.

## **III. WHAT TO EXPECT AFTER YOU FILE YOUR WRIT PETITION**

A court may:

- Deny the petition. Possible grounds are that a previous petition on this issue was denied by the same court, the petition fails to show that an

appeal is inadequate, or the claim is frivolous. The petition may be denied without any explanation at all.

- Issue an order to show cause, which means that the court has taken your allegations as true and you will be entitled to relief if your allegations are proved. However, by issuing an order to show cause the court also allows a return or response to be filed by the person (hospital/detention facility) whose custody you are in to counter your allegations. An order to show cause does not grant the relief requested in the petition.
- Request an informal response from the respondent (hospital/detention facility). After reviewing the informal response, the court may request more information, issue an order to show cause, or deny the petition.

You should hear back from the court within 60 days.

#### **IV. WHAT TO DO IF THE WRIT PETITION IS DENIED**

If the Superior Court has denied your petition for writ of habeas corpus, you may file a new petition for writ of habeas corpus first in the Court of Appeal and then, if the Court of Appeal denies the petition, the Supreme Court of California. If your California Supreme Court petition is denied, you do not file a notice of appeal—you file a new petition instead.

**(Specific instructions for each form continue on next page)**

## V. INSTRUCTIONS FOR THE ONE PAGE (MC-265) WRIT PETITION FORM

A blank form can be found included in this packet as Attachment A and at the following link: <http://www.courts.ca.gov/documents/mc265.pdf>. It may be helpful to refer to it when reading the directions below.

### A. *Boxes at the Top of the Petition Form*

- 1) Fill in your **name**, the **facility name and address**, and the **phone number (with area code)** at which you can receive calls.
- 2) In the box that says "SUPERIOR COURT OF CALIFORNIA, COUNTY OF: " Write the **name of the county where you are presently confined if you are challenging the conditions of your confinement**. Write the **name of the county where you were given an order for your confinement if you are challenging that order**.
- 3) Below the phrase "IN THE MATTER OF (NAME):" write your **full name**.
- 4) Leave the box which says "CASE NUMBER" blank. The court will assign you a case number after your petition is filed.

### B. *Numbered questions/statements*

- 1) Write the **name of the hospital/detention facility** in which you are being held. The **name of persons having custody** would be the name of the Hospital Executive Director, Sheriff, etc.
- 2) Write the **date of your admission** next to the phrase "(date)" on the first line of this section. Then, **check** the box that states your legal status. For example, if you are on a Welfare and Institutions code § 5150 hold, check the box that says W & I § 5150.
- 3) **If you are challenging the legitimacy of your confinement:**

Check box "a", and list the reasons you believe your confinement to be illegal. For example, if you feel you have met the criteria for restoration of

sanity, in that you are no longer a danger to yourself or others, state this, and provide any information you have to support that you are no longer a danger to yourself or others. Use extra sheets if you need to.

**4) If you are challenging the conditions of your confinement:**

Check box "b", and clearly describe the **rights** that are being denied you while you are confined, and the **date(s)** on which the violation(s) occurred. You can challenge the denial of any right which you are entitled to under state or federal law (including the constitution, court cases, statutes and administrative regulations) or under the policies of the facility in which you are being held. These might include such rights as the right to access to your possessions, the right to have visitors, the right to make phone calls and send and receive mail, the right not to be secluded or restrained inappropriately or excessively, the right not be involuntarily medicated on a nonemergency basis, etc. (For examples, see 9 CCR 883 and 884) As noted above, it will be helpful (but is not necessary) for you to refer in your petition to the statute number, policy number, case citation, etc. guaranteeing the(se) right(s).

Usually, you can only protest when rights are **currently** being denied you or when you have evidence you will be denied your rights **in the foreseeable future**.

- 5) If you have filed a petition for a writ of habeas corpus asking for release from or a change of the conditions of your involuntary commitment answer "YES." If you answered YES to this question, list each request for your relief you made along with the following information: the date of the request, the court to which it was addressed, the violation(s) you were protesting in that petition, and the result. Also include any petitions to be released to the Conditional Release Program you have filed.
- 6) Check boxes a, b, c, and d. If you cannot afford an attorney to represent you in the habeas proceeding, next to or below box "d," you should write "including appointment of counsel to represent me in this action, as I am indigent."

**C. Verification and Signature**

Print or type your name on the line in the bottom, left corner. Sign your name on the line in the bottom, right corner.

## **VI. INSTRUCTIONS FOR THE ONE PAGE (MC-270) WRIT PETITION FORM**

A blank form can be found included in this packet as Attachment B and at the following link: <http://www.courts.ca.gov/documents/mc270.pdf>. It may be helpful to refer to it when reading the directions below.

### ***D. Boxes at the Top of the Petition Form***

- 5) Fill in your **name**, the **facility name and address**, and the **phone number (with area code)** at which you can receive calls.
- 6) In the box that says "SUPERIOR COURT OF CALIFORNIA, COUNTY OF: " Write the **name of the county where you are presently confined if you are challenging the conditions of your confinement**. Write the **name of the county where you were given an order for your confinement if you are challenging that order**.
- 7) Below the phrase "IN THE MATTER OF (NAME):" write your **full name**.
- 8) Leave the box which says "CASE NUMBER" blank. The court will assign you a case number after your petition is filed.

### ***E. Numbered questions/statements***

- 7) Write the **name of the hospital/detention facility** in which you are being held. The **name of persons having custody** would be the name of the Hospital Executive Director, Sheriff, etc.
- 8) Write the **date of your admission** next to the phrase "(date)" on the first line of this section. Then, **check** the box that states your legal status. For example, if you are held as not guilty by reason of insanity, check the box that says, PC section 1026.
- 9) **If you are challenging the legitimacy of your confinement:**



Check box "a", and list the reasons you believe your confinement to be illegal. For example, if you feel you have met the criteria for restoration of sanity, in that you are no longer a danger to yourself or others, state this, and provide any information you have to support that you are no longer a danger to yourself or others. Use extra sheets if you need to.

**10) If you are challenging the conditions of your confinement:**

Check box "b", and clearly describe the **rights** that are being denied you while you are confined, and the **date(s)** on which the violation(s) occurred. You can challenge the denial of any right which you are entitled to under state or federal law (including the constitution, court cases, statutes and administrative regulations) or under the policies of the facility in which you are being held. These might include such rights as the right to access to your possessions, the right to have visitors, the right to make phone calls and send and receive mail, the right not to be secluded or restrained inappropriately or excessively, the right not be involuntarily medicated on a nonemergency basis, etc. (For examples, see 9 CCR 883 and 884) As noted above, it will be helpful (but is not necessary) for you to refer in your petition to the statute number, policy number, case citation, etc. guaranteeing the(se) right(s).

Usually, you can only protest when rights are **currently** being denied you or when you have evidence you will be denied your rights **in the foreseeable future**.

- 11) If you have filed a petition for a writ of habeas corpus asking for release from or a change of the conditions of your involuntary commitment answer "YES." If you answered YES to this question, list each request for your relief you made along with the following information: the date of the request, the court to which it was addressed, the violation(s) you were protesting in that petition, and the result. Also include any petitions to be released to the Conditional Release Program you have filed.
- 12) Check boxes a, b, c, and d. If you cannot afford an attorney to represent you in the habeas proceeding, next to or below box "d," you should write "including appointment of counsel to represent me in this action, as I am indigent."

## ***F. Verification and Signature***

Print or type your name on the line in the bottom, left corner. Sign your name on the line in the bottom, right corner.

## **VII. INSTRUCTIONS FOR THE SIX PAGE (MC-275) WRIT PETITION FORM**

A blank form can be found included in this packet as Attachment C and at the following link: <http://www.courts.ca.gov/documents/mc275.pdf>. It may be helpful to refer to it when reading these directions.

### **A. Blanks at the Front of the Petition Form**

- 1) Fill in **your name and the name and address of the facility** you are currently at and your **ID number**
- 2) The next two lines are for the **name of the court** you are filing the writ in. Usually a writ is started in the superior court of either the county of confinement (for alleged rights violations) or the county of commitment (for legitimacy of confinement questions).
- 3) You are the **petitioner** and the **respondent** is the name of the state agency (California Department of State Hospitals, Sheriff's Department, etc.) confining you.
- 4) Leave the Line under "**Petition for Writ of Habeas Corpus**" blank. The court clerk will fill in the case number for your writ (it is different than the case number you have with the committing court for your confinement).
- 5) Under "**This petition concerns**", choose the box that applies or you can check "other" and write in either "conditions in state hospital", "rights violation", "length of civil commitment", etc.

### **B. Numbered Questions**

- 1) Write your name again and where you are committed or detained. Check the box for "Civil Commitment."

- 2) Fill out “a” through “i” as accurately as possible. For letter “f” substitute “commitment” for “sentence” if that applies to you.
- 3) Fill in the last plea you entered and what kind of trial you had, if that applies to you.
- 4) For #6 and #7, put either what right you think has been denied or why you think you are illegally confined. Give supporting facts/cases (if known).

Clearly describe the **rights** that are being denied you while you are confined, and the **date(s)** on which the violation(s) occurred. You can challenge the denial of any right which you are entitled to under state or federal law (including the constitution, court cases, statutes and administrative regulations) or under the policies of the facility in which you are being held. These might include such rights as the right to access to your possessions, the right to have visitors, the right to make phone calls and send and receive mail, the right not to be secluded or restrained inappropriately or excessively, the right not be involuntarily medicated on a nonemergency basis, etc. (For examples, see 9 CCR 883 and 884) As noted above, it will be helpful (but is not necessary) for you to refer in your petition to the statute number, policy number, case citation, etc. guaranteeing the(se) right(s).

Usually, you can only protest when rights are **currently** being denied you or when you have evidence you will be denied your rights **in the foreseeable future**.

List the reasons you believe your confinement to be illegal. For example, if you feel you have met the criteria for restoration of sanity, in that you are no longer a danger to yourself or others, state this, and provide any information you have to support that you are no longer a danger to yourself or others.

- 5) Questions 8, 9 and 10 are mostly relevant if you are contesting the legality of your confinement. Fill out as appropriate.
- 6) Question 11 is regarding the grievance or complaint process within the facility that you are confined. For example, the Patients’ Rights Complaint Process has four levels (the complaint with the patients’

rights advocate and then three levels of appeal). Normally, you must finish (exhaust) all of the grievance or complaint levels before filing a petition for a writ of habeas corpus.

- 7) Questions 12, 13, and 14 relate to previous requests for relief from your current commitment. If you have filed such requests then fill in the requested information.
- 8) Question 15 relates to if there has been a delay since you feel your sentence became illegal and you file the request for a writ.
- 9) Question 16 and 17 relate to currently pending cases you have and whether you currently have an attorney.
- 10) If you are not filing in the Superior Court, explain why not.
- 11) Date and sign your name at the bottom of page 6.

## **VIII. ADDRESSES OF SUPERIOR COURTS IN COUNTIES WHERE STATE HOSPITALS ARE LOCATED**

### DSH-Atascadero

San Luis Obispo Superior Court  
1050 Monterey Street, Rm. 220  
San Luis Obispo, CA 93408

### DSH-Coalinga

Fresno County Superior Court  
1100 Van Ness Avenue  
Fresno, CA 93724-0002

### DSH-Metropolitan

Los Angeles County Superior Court  
12720 Norwalk Avenue  
Norwalk, CA 90650

### DSH-Napa

Napa County Superior Court  
825 Brown Street  
Napa, CA 94559-0880

### DSH-Patton

San Bernardino County Superior Court  
351 N. Arrowhead Ave  
San Bernardino CA 92415

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For legal assistance call 800-776-5746 or complete a request for assistance [\[form\]](#). For all other purposes call 916-504-5800 (Northern CA); 213-213-8000 (Southern CA).

*Disability Rights California is funded by a variety of sources, for a complete list of funders, go to <http://www.disabilityrightsca.org/Documents/ListofGrantsAndContracts.html>.*

# ATTACHMENT A

ATTORNEY OR PETITIONER WITHOUT ATTORNEY ( <i>Name and Address</i> ):	TELEPHONE NO.:	<b>FOR COURT USE ONLY</b>
PETITIONER'S BIRTH DATE:		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
IN THE MATTER OF ( <i>NAME</i> ):	Petitioner	CASE NUMBER:
<b>PETITION FOR WRIT OF HABEAS CORPUS — LPS Act</b>		

1. Petitioner is being unlawfully restrained of liberty at (*specify name of treatment facility*):  
by (*specify name of agency and treating psychiatrist*):
2. Petitioner was admitted to the treatment facility on (*date*): \_\_\_\_\_ and is currently being held pursuant to  
 W & I § 5150 (72-hour hold)     W & I § 5250 (14-day certification)     W & I § 5260 (2d 14-day certification)  
 W & I § 5270.15 (30-day cert.)     W & I § 5300 (180-day post-certification)     W & I § 5352.1 (temporary conservatorship)  
 W & I § 5350 (conservatorship)     Other (*specify*): \_\_\_\_\_

3. Check at least one box:  
a.  Petitioner is illegally confined for the following reason:

- b.  Petitioner has been denied the following rights without good cause (Welfare and Institutions Code sections 5325, 5325.1, and 5326):

4. Petitioner requests that this court (*check all that apply*):
- a.  Issue a Writ of Habeas Corpus to the director of the facility named in item 1, commanding that the petitioner be brought before this court at a specified time and place.
- b.  Order the facility to release petitioner from restraint.
- c.  Order that all rights to which petitioner is entitled as a patient be observed.
- d.  Grant such other relief as this court deems appropriate.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

.....  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF PETITIONER OR PERSON REQUESTING WRIT ON PETITIONER'S BEHALF)

# ATTACHMENT B



ATTORNEY OR PETITIONER WITHOUT ATTORNEY (Name and Address):		TELEPHONE NO.:	FOR COURT USE ONLY
PETITIONER'S BIRTH DATE:			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF			CASE NUMBER:
IN THE MATTER OF (NAME):		Petitioner	
<b>PETITION FOR WRIT OF HABEAS CORPUS—Penal Commitment</b>			

1. Petitioner is being unlawfully restrained of liberty at (specify name of treatment facility):  
by (specify name of persons having custody, if known):
  
2. Petitioner was admitted to the treatment facility on (date): \_\_\_\_\_ and is currently being held pursuant to:
 

<input type="checkbox"/> Penal Code § 1026 (not guilty by reason of insanity)	<input type="checkbox"/> Penal Code § 1026.5(b) (extended commitment)
<input type="checkbox"/> Penal Code § 1370 (incompetent to stand trial)	<input type="checkbox"/> Penal Code § 2684 (prisoners transferred to state hospital)
<input type="checkbox"/> Penal Code § 2962 (mentally disordered offender)	<input type="checkbox"/> Former W & I § 6300 (MDSO)
<input type="checkbox"/> Other (specify): _____	
  
3. Check at least one box:
  - a.  Petitioner is illegally confined for the following reason:
  
  
  
  - b.  Petitioner has been denied the following rights without good cause (Penal Code section 2600):
  
4. Petitioner has no adequate and speedy remedy at law.
  
5. Have you made any previous requests for relief from this confinement? \_\_\_\_\_ If your answer is yes, state the nature and grounds for your request, the date it was made, and the result:
  
  
6. Petitioner requests that this court (check all that apply):
  - a.  Issue a Writ of Habeas Corpus to the director of the facility named in item 1, commanding that the petitioner be brought before this court at a specified time and place.
  - b.  Order the facility personnel to release petitioner from said restraint.
  - c.  Order that all rights to which petitioner is entitled as a patient be observed.
  - d.  Grant such other relief as this court deems appropriate.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  
Date:

..... (TYPE OR PRINT NAME) ▶ \_\_\_\_\_ (SIGNATURE OF PETITIONER OR PERSON REQUESTING WRIT ON PETITIONER'S BEHALF)

# ATTACHMENT C

Name:  
Address:

CDC or ID Number:

(Court)

Petitioner	vs.	Respondent
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**PETITION FOR WRIT OF HABEAS CORPUS**

No.

(To be supplied by the Clerk of the Court)

**INSTRUCTIONS—READ CAREFULLY**

- **If you are challenging an order of commitment or a criminal conviction and are filing this petition in the Superior Court, you should file it in the county that made the order.**
- **If you are challenging the conditions of your confinement and are filing this petition in the Superior Court, you should file it in the county in which you are confined.**

- Read the entire form *before* answering any questions.
- This petition must be clearly handwritten in ink or typed. You should exercise care to make sure all answers are true and correct. Because the petition includes a verification, the making of a statement that you know is false may result in a conviction for perjury.
- Answer all applicable questions in the proper spaces. If you need additional space, add an extra page and indicate that your answer is "continued on additional page."
- If you are filing this petition in the superior court, you only need to file the original unless local rules require additional copies. Many courts require more copies.
- If you are filing this petition in the Court of Appeal in paper form and you are an attorney, file the original and 4 copies of the petition and, if separately bound, 1 set of any supporting documents (unless the court orders otherwise by local rule or in a specific case). If you are filing this petition in the Court of Appeal electronically and you are an attorney, follow the requirements of the local rules of court for electronically filed documents. If you are filing this petition in the Court of Appeal and you are *not* represented by an attorney, file the original and one set of any supporting documents.
- If you are filing this petition in the California Supreme Court, file the original and 10 copies of the petition and, if separately bound, an original and 2 copies of any supporting documents.
- Notify the Clerk of the Court in writing if you change your address after filing your petition.

Approved by the Judicial Council of California for use under rule 8.380 of the California Rules of Court (as amended effective January 1, 2007). Subsequent amendments to rule 8.380 may change the number of copies to be furnished to the Supreme Court and Court of Appeal.

**This petition concerns:**

- A conviction  Parole
- A sentence  Credits
- Jail or prison conditions  Prison discipline
- Other (*specify*):

1. Your name:
2. Where are you incarcerated?
3. Why are you in custody?  Criminal conviction  Civil commitment

*Answer items a through i to the best of your ability.*

- a. State reason for civil commitment or, if criminal conviction, state nature of offense and enhancements (for example, "robbery with use of a deadly weapon").
- b. Penal or other code sections:
- c. Name and location of sentencing or committing court:
- d. Case number:
- e. Date convicted or committed:
- f. Date sentenced:
- g. Length of sentence:
- h. When do you expect to be released?
- i. Were you represented by counsel in the trial court?  Yes  No *If yes, state the attorney's name and address:*
4. What was the LAST plea you entered? (*Check one*):
- Not guilty  Guilty  Nolo contendere  Other:
5. If you pleaded not guilty, what kind of trial did you have?
- Jury  Judge without a jury  Submitted on transcript  Awaiting trial

## 6. GROUNDS FOR RELIEF

**Ground 1:** State briefly the ground on which you base your claim for relief. For example, "The trial court imposed an illegal enhancement." (If you have additional grounds for relief, use a separate page for each ground. State ground 2 on page 4. For additional grounds, make copies of page 4 and number the additional grounds in order.)

## a. Supporting facts:

Tell your story briefly without citing cases or law. If you are challenging the legality of your conviction, describe the facts on which your conviction is based. *If necessary, attach additional pages.* CAUTION: You must state facts, not conclusions. For example, if you are claiming incompetence of counsel, you must state facts specifically setting forth what your attorney did or failed to do and how that affected your trial. Failure to allege sufficient facts will result in the denial of your petition. (See *In re Swain* (1949) 34 Cal.2d 300, 304.) A rule of thumb to follow is, *who* did exactly *what* to violate your rights at what time (*when*) or place (*where*). (If available, attach declarations, relevant records, transcripts, or other documents supporting your claim.)

b. Supporting cases, rules, or other authority (*optional*):

(Briefly discuss, or list by name and citation, the cases or other authorities that you think are relevant to your claim. If necessary, attach an extra page.)

7. **Ground 2 or Ground \_\_\_\_\_** *(if applicable)*:

a. Supporting facts:

b. Supporting cases, rules, or other authority:

8. Did you appeal from the conviction, sentence, or commitment?  Yes  No If yes, give the following information:
- a. Name of court ("Court of Appeal" or "Appellate Division of Superior Court"):
  - b. Result: c. Date of decision:
  - d. Case number or citation of opinion, if known:
  - e. Issues raised: (1)  
(2)  
(3)
  - f. Were you represented by counsel on appeal?  Yes  No If yes, state the attorney's name and address, if known:
9. Did you seek review in the California Supreme Court?  Yes  No If yes, give the following information:
- a. Result: b. Date of decision:
  - c. Case number or citation of opinion, if known:
  - d. Issues raised: (1)  
(2)  
(3)
10. If your petition makes a claim regarding your conviction, sentence, or commitment that you or your attorney did not make on appeal, explain why the claim was not made on appeal:
11. Administrative review:
- a. If your petition concerns conditions of confinement or other claims for which there are administrative remedies, failure to exhaust administrative remedies may result in the denial of your petition, even if it is otherwise meritorious. (See *In re Muszalski* (1975) 52 Cal.App.3d 500.) Explain what administrative review you sought or explain why you did not seek such review:
  - b. Did you seek the highest level of administrative review available?  Yes  No  
*Attach documents that show you have exhausted your administrative remedies.*

12. Other than direct appeal, have you filed any other petitions, applications, or motions with respect to this conviction, commitment, or issue in any court?  Yes If yes, continue with number 13.  No If no, skip to number 15.

13 a. (1) Name of court:

(2) Nature of proceeding (for example, "habeas corpus petition"):

(3) Issues raised: (a)

(b)

(4) Result (attach order or explain why unavailable):

(5) Date of decision:

b. (1) Name of court:

(2) Nature of proceeding:

(3) Issues raised: (a)

(b)

(4) Result (attach order or explain why unavailable):

(5) Date of decision:

c. *For additional prior petitions, applications, or motions, provide the same information on a separate page.*

14. If any of the courts listed in number 13 held a hearing, state name of court, date of hearing, nature of hearing, and result:

15. Explain any delay in the discovery of the claimed grounds for relief and in raising the claims in this petition. (See *In re Swain* (1949) 34 Cal.2d 300, 304.)

16. Are you presently represented by counsel?  Yes  No If yes, state the attorney's name and address, if known:

17. Do you have any petition, appeal, or other matter pending in any court?  Yes  No If yes, explain:

18. If this petition might lawfully have been made to a lower court, state the circumstances justifying an application to this court:

I, the undersigned, say: I am the petitioner in this action. I declare under penalty of perjury under the laws of the State of California that the foregoing allegations and statements are true and correct, except as to matters that are stated on my information and belief, and as to those matters, I believe them to be true.

Date:



(SIGNATURE OF PETITIONER)