

Arizona Department of Corrections Rehabilitation & Reentry



DOUGLAS A. DUCEY
GOVERNOR

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DAVID SHINN
DIRECTOR

Request for Absolute Discharge

Please Print Clearly

NAME	ADC NUMBER
STREET ADDRESS	CITY
STATE	ZIP CODE
TELEPHONE NUMBER <i>(area code)</i> () -	ALTERNATE TELEPHONE NUMBER <i>(area code)</i> () -
DATE OF BIRTH <i>(mm/dd/yyyy)</i>	SOCIAL SECURITY NUMBER - -
SIGNATURE	

- Please mail my Absolute Discharge Certificate to me at the address I have indicated above.
- I would like to pick up my Absolute Discharge Certificate

By filling out this form and with your signature you are authorizing the Arizona Department of corrections Rehabilitation & Reentry to actively search and provide back information with regards to your Absolute Discharge.

Pursuant to A.R.S. §13-906, if you qualify to receive an Absolute Discharge you will receive one in the mail in the next 14-21 days. If you would like to check the status, you may contact Central Office Records at (602) 542-3277.

A.R.S. §13-907 states that upon completion of your term of probation of absolute discharge and upon the completion of payment of any fine or restitution imposed, and you have not previously been convicted of any other felony your civil rights will be automatically restored with the exception of possession of firearms.

When you are applying for the restoration of your civil rights, you should have your Certification of Absolute Discharge with you for the court proceeding.