



**FLORIDA DEPARTMENT OF LAW ENFORCEMENT**  
**APPLICATION FOR CERTIFICATION OF ELIGIBILITY**  
 PLEASE TYPE OR PRINT ALL INFORMATION

SECTION A - ALL APPLICANT

Last Name		First Name		Middle Name	
Alias Last Name (Maiden, Divorce, etc.) (More names on page 2)		Alias First Name (Maiden, Divorce, etc.)		Alias Middle Name (Maiden, Divorce, etc.)	
Date of Birth (MM/DD/YYYY)	Race	Sex	Social Security No.(optional)		
Residence Phone ( )		Business Phone ( )			
Mailing Address			City	State	Zip
Permanent Address			City	State	Zip
Arresting Agency	Florida Driver's License No.	Email Address			

<b>Request Type</b> Expunge <b>NOTE:</b> For Expunction applications, the State Attorney or Statewide Prosecutor must complete Section B.	
<p><b>Date(s) of Arrest</b></p> <p><b>Charge(s)</b> (add additional dates of arrest/charges on page 2)</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>I hereby certify that the information contained herein is true and correct to the best of my knowledge.</p> <p>Signature _____ Date _____</p>	<p align="center"><b>NOTARY</b>  <b>(PLEASE STAMP WITH SEAL)</b>          Sworn to and subscribed before me</p> <p>This _____ Day of _____, 20 _____</p> <p align="center">_____          (Signature of Notary Public)</p> <p align="center">(Print, Type, or Stamp Commissioned Name of Notary or Deputy Clerk of the Court)</p> <p>Personally Known _____ or Produced Identification _____</p> <p>Type of Identification Produced: _____</p>

**FOR EXPUNCTION APPLICATION ONLY**

State Attorney/Statewide Prosecutor		County	Circuit	Reviewing Officer
Charge(s) Description	Statute Violation	Case Number	Action	
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
<p>If one of paragraphs below is checked, my signature below indicates that, based on the disposition of all charges related to the above-referenced case, that case is eligible to be expunged, if the applicant is otherwise eligible to have his or her record expunged under law. My signature does not imply that the applicant has satisfied all other statutory eligibility criteria, or that this Office would not oppose a petition to expunge the above-referenced case. By checking paragraph 1, 2, or 3, I certify that the above-referenced case is presently eligible to be expunged, assuming that the applicant is otherwise eligible, because:</p> <p><input type="checkbox"/> 1. An indictment, information, or other charging document was not filed or issued in the case; OR</p> <p><input type="checkbox"/> 2. An indictment, information, or other charging document, if filed or issued in the case, was dismissed or nolle prosequi by the state attorney or statewide prosecutor, or was dismissed by a court of competent jurisdiction; OR</p> <p><input type="checkbox"/> 3. (a) None of the charges (acts) related to the arrest or alleged criminal activity to which the application for certificate of eligibility to expunge pertains resulted in an adjudication of guilt or of delinquency; AND</p> <p>(b) The record of the arrest or alleged criminal activity to which the application for certificate of eligibility to expunge pertains has been sealed for at least 10 years; AND</p> <p>(c) None of the charges (if any) for which adjudication of guilt or of delinquency was withheld relates to a violation of s. 393.135, s. 394.4593, s. 787.025, chapter 794, s.796.03, s. 800.04, s. 810.14, s. 817.034, s. 825.1025, s. 827.071 chapter 839, s.847.0133, s. 847.0135, s. 847.0145, s. 893.135, s. 916.1075, a violation enumerated in s.907.041, or any violation specified as a predicate offense for registration as a sexual predator pursuant to s. 775.21, without regard to whether that offense alone is sufficient to require such registration, or for registration as a sexual offender pursuant to s.943.0435.</p>		<p>The above-referenced case is not eligible to be expunged because:</p> <p><input type="checkbox"/> One or more of the charges (acts) related to the arrest or alleged criminal activity to which the application for certificate of eligibility to expunge pertains resulted in an adjudication of guilt or of delinquency;</p> <p>OR, BECAUSE OF ONE OR MORE OF THE FOLLOWING REASONS:</p> <p><input type="checkbox"/> The record of the arrest or alleged criminal activity to which the application for certificate of eligibility to expunge pertains has not been sealed for at least 10 years;</p> <p><input type="checkbox"/> One or more of the charges for which an adjudication of guilt or of delinquency was withheld relate to a violation of s. 393.135, s. 394.4593, s.787.025, chapter 794, s.796.03, s.800.04, s. 810.14, s. 817.034, s. 825.1025, s. 827.071, chapter 839, s. 847.0133, s. 847.0135, s. 847.0145, s. 893.135, s. 916.1075, a violation enumerated in s. 907.041, or any violation specified as a predicate offense for registration as a sexual predator pursuant to s.775.21, without regard to whether that offense alone is sufficient to require such registration, or for registration as a sexual offender pursuant to s.943.0435;</p> <p><input type="checkbox"/> Records available to this Office disclose some other ground of statutory ineligibility (e.g., adjudication of guilt in a different case; previous expunction or sealing).</p>		
Signature _____ Title(Prosecuting Authority) _____ Date _____		Signature _____ Title(Prosecuting Authority) _____ Date _____		

SECTION B - STATE ATTORNEY FOR EXPUNCTION APPLICATION ONLY

**IMPORTANT: A CERTIFICATE OF ELIGIBILITY IS VALID FOR 12 MONTHS FROM THE DATE OF ISSUANCE. AFTER THAT TIME, A NEW CERTIFICATE MUST BE APPLIED FOR.**

## SECTION A - SUPPLEMENTAL INFORMATION

### FOR SEAL/EXPUNGE

Last Name	First Name	Middle Name
Date of Birth (MM/DD/YYYY)	Race	Sex
		Social Security No.(optional)

#### Aliases:(Maiden, Divorce, etc.)

	Last Name	First Name	Middle Name
1.			
2.			
3.			
4.			

#### Additional Charges

	Date of Arrest	Charge Details
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

## GENERAL INSTRUCTIONS & INFORMATION:

1. **Applicable Law:** Sections 943.0585 and 943.059, Florida Statutes, and Chapter 11C-7, Florida Administrative Code (FAC), govern the use of this application, for the expunction or sealing of non-judicial criminal history records by criminal justice agencies. These statutes and the implementing rules require that you obtain a **Certificate of Eligibility** from the Florida Department of Law Enforcement (FDLE) prior to requesting a court for an order to seal or expunge your non-judicial criminal history records, and that you provide the information required by this application process.
2. Please type or print all information, except signatures. Complete all required portions of the application and submit all required documents and the processing fee noted below under Section A. Failure to disclose your social security number (SSN) may delay the processing time of your application. **If your application is submitted without all the required information, documentation, or the processing fee, FDLE may reject your application.**
3. **Mailing Information:** Mail your completed application package and fee to the following address:  
  
**Florida Department of Law Enforcement  
ATTN: Expunge/Seal Section  
P.O. BOX 1489  
Tallahassee, Florida 32302-1489**
4. **Contact Information:** FDLE's Expunge/Seal Section - (850) 410-7870
5. **Optional Personal Review of your Florida Criminal History Record:** If you have questions about what appears in your Florida criminal history record maintained by FDLE, you may wish to obtain a Personal Review of your record from FDLE, pursuant to Chapter 11C-8, FAC, before submitting this application form. The Personal Review is **optional** and is not required for FDLE to process your Application for Certification of Eligibility for expunction or sealing of your record. To obtain a Personal Review, please complete and submit the enclosed FDLE **fingerprint form** and a **letter** to FDLE at the address above. If you submit the fingerprint form and a letter for your Personal Review, please **DO NOT** send in the APPLICATION or the \$75.00 processing fee until the Personal Review is completed; the results of your personal review may influence your decision to request the expunction or sealing of your criminal history record.

## SECTION A: FOR ALL APPLICANTS

1. Complete **every part** of **SECTION A**. Make sure your **signature**, as the applicant, is **notarized**.
2. If you were given a **Notice to Appear** and **not** physically arrested for the charge(s), indicate the date of the Notice to Appear in the box marked "Date of Arrest."
3. **NON-REFUNDABLE Processing Fee:** Submit with your application a **money order or Cashier's check** in the amount of **\$75.00**, made payable to the Florida Department of Law Enforcement (FDLE).
4. Submit the attached **fingerprint form** with your fingerprints, as part of your application packet. **This form must be completed by authorized personnel at a law enforcement or criminal justice agency**, using **only** the attached FDLE fingerprint form. (If you have obtained a **Personal Review**, **send the fingerprint card back** with the enclosed fingerprint form, please resubmit the same for the Expunge/Seal "Certificate of Eligibility" application.)
5. Provide a **certified copy of the final disposition(s)** for **each** of the charges you list in your application. Dispositions can usually be obtained from the office of the Clerk of Courts in the county where you were charged. For pretrial intervention and other diversion programs, a **certified letter of completion** from the State Attorney or Statewide Prosecutor may substitute for a certified disposition. If you received probation for any of the charges, you must also submit a **a certified copy of your probation**.

## SECTION B: FOR EXPUNCTION APPLICANTS ONLY

1. **Submit the application to the State Attorney or Statewide Prosecutor for completion of SECTION B only if you are applying to have your records EXPUNGED.** NOTE: In addition to proper completion of Section B, you must also submit the certified copies of disposition(s) and termination of probation required under Section A.

## **REASONS AN APPLICATION FOR CERTIFICATE OF ELIGIBILITY TO SEAL OR EXPUNGE A CRIMINAL HISTORY RECORD WILL BE DENIED**

Pursuant to Sections s.943.0585 and s.943.059 , Florida Statutes, a Certificate of Eligibility to expunge or seal a criminal history record **cannot** be issued under any of the following circumstances:

1. The criminal history record reflects that you have been adjudicated guilty of a criminal offense or comparable ordinance violation or adjudicated delinquent for committing any felony or a misdemeanor specified in s.943.051(3)b. **Certain driving violations are classified as criminal, such as DUI, reckless driving, and (with some exceptions) driving while license is suspended /canceled/revoked.**
2. The criminal history record reflects that you have been adjudicated guilty of or adjudicated delinquent for committing one or more of the acts stemming from the arrest or alleged criminal activity to which the application pertains.
3. The criminal history record reflects that you have received a prior sealing or expunction of a criminal history record under s.943.0585 , s.943.059 , former s.893.14, former s.901.33, former s.943.058, or from any jurisdiction outside the state.
4. The criminal history record to which the application pertains relates to a violation of s.393.135, s.394.4593, s.787.025, chapter 794, s.796.03, s.800.04, s.810.14, s.817.034, s.825.1025, s.827.071, chapter 839, s.847.0133, s.847.0135, s.847.0145, s.893.135, s.916.1075, a violation enumerated in s.907.041, or a violation of any offense qualifying for registration as a sexual predator under s.775.21 or for registration as a sexual offender under s.943.0435, Fla. Stat., with a finding of guilt, or a plea or guilty or nolo contendere (without regard to whether adjudication was withheld).
5. The criminal history record reflects that you have another petition to seal or expunge pending before a court of competent jurisdiction.
6. The criminal history record reflects that the court supervision applicable to the disposition of the arrest or alleged criminal activity to which the application pertains has not been completed.
7. **[For expunction only]** The criminal history record reflects that some or all of the charges related to the arrest or criminal activity to which the application pertains were not dismissed prior to trial, adjudication, or the withholding of adjudication, If no other disqualification applies, the record would be eligible to sealed.

**PLEASE NOTE:** The Governor and Cabinet of Florida, acting in the capacity of the Board of Executive Clemency, declared on June 10, 1999, that the granting of a full pardon does not remove any condition of ineligibility for sealing or expunging a criminal history record which would otherwise be imposed by a conviction or withholding of adjudication pursuant to Sections 943.0585 and 943.059 , Florida Statutes, and, acting in the capacity of agency head of the Department of Law Enforcement, the Board directed FDLE to deny a Certificate of Eligibility to any person receiving a pardon who is otherwise ineligible for the sealing or expunging of the person's criminal history record.

## DISQUALIFYING CHARGES FOR EXPUNCTION/SEALING

A request for a certificate of eligible for an expunction or sealing of a criminal history record will be denied if the defendant was found guilty or pled guilty or nolo contendere, even if the adjudication was withheld, on any violation of the following:

### Offenses listed in S.907.041, F.S.

1. Arson
2. Aggravated Assault
3. Aggravated Battery
4. Illegal use of explosives
5. Child abuse or Aggravated Child Abuse
6. Abuse of an elderly person or disabled adult, or aggravated abuse of an elderly person or disabled adult
7. Aircraft piracy
8. Kidnapping
9. Homicide
10. Manslaughter
11. Sexual Battery
12. Robbery
13. Carjacking
14. Lewd, lascivious, or indecent assault or act upon or in the presence of a child under the age of 16 years
15. Sexual activity with a child, who is 12 years of age or older but less than 18 years of age, by or at solicitation of a person in familial or custodial authority
16. Burglary of a dwelling
17. Stalking of Aggravated Stalking
18. Act of Domestic violence, as defined in **s.741.28**
19. Home-invasion Robbery
20. Act of Terrorism as defined by s.775.30
21. Attempting or conspiring to commit any of the above crimes
22. Manufacturing any substances in violation of chapter 893

### **S.393.135, F.S.**

Sexual misconduct with developmentally disabled person and related offenses

### **S.394.4593, F.S.**

Sexual misconduct with mentally ill person and related offenses

### **S.787.025, F.S.**

Luring or enticing a child

### **Chapter 794, F.S.**

Sexual Battery and related offense

### **S.796.03, F.S.**

Procuring person under 18 for prostitution

### **S.800.04, F.S.**

Lewd or lascivious offenses committed upon or in the presence of persons less than 16 years of age

### **S.810.14, F.S.**

Voyuerism

### **S.817.034, F.S.**

Florida Communication Fraud Act

(Scheme to Defraud or Organized Fraud, as defined in s.817.034, F.S.)

### **S.825.1025, F.S.**

Lewd or lascivious offense upon or in presence of elderly person or disabled adult

### **S.827.071, F.S.**

Sexual performance by a child

### **Chapter 839, F.S.**

Offenses by Public Officers and Employees

### **S.847.0133, F.S.**

Showing, etc., obscene literature to minor

### **S.847.0135, F.S.**

Computer pornography

### **S.847.0145, F.S.**

Selling or buying of minors

### **S.893.135, F.S.**

Trafficking in controlled substances

### **S.916.1075**

Sexual misconduct with mentally deficient or mentally ill defendant and related offenses

A violation of any offense qualify for registration as a sexual predator under **s.775.21** or for registration as a sexual offender under

### **s.943.0435**

All references are from Florida Statutes

# FINGERPRINTS FOR APPLICATION FOR CERTIFICATION OF ELIGIBILITY

**Name:**  
Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

**Alias(aka)**  
Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

**RACE:** \_\_ **SEX:** \_\_ **DOB:** \_\_\_\_ **\*SOC:** \_\_\_\_\_ **Place of Birth:** \_\_\_\_\_

**Please mail completed application and fingerprints to:  
FDLE, P.O.Box 1489, Tallahassee, FL 32302, Attn: Expunge/Seal Section**

Signature of official taking fingerprints: \_\_\_\_\_ **ORI:** \_\_\_\_\_

Signature of person fingerprinted: \_\_\_\_\_ **Date:** \_\_\_\_\_

1. R.Thumb	2. R.Index	3. R.Middle	4. R.Ring	5. R.Little
6. L.Thumb	7. L.Index	8. L.Middle	9. L.Ring	10. L.Little
Left Four Fingers Taken Simultaneously		L.Thumb	R.Thumb	Right Four Fingers Taken Simultaneously

**\*\* Social Security Number, this information is voluntary; failure to disclose may delay the processing time of your application.**

☒ **DID YOU REMEMBER TO:**

- ☐ Complete the application? Did you sign and date the application in front of a notary?
- ☐ Provide a certified (stamped copy) disposition of your case you want to have sealed/expunged?
- ☐ Include your name, race/sex, date of birth, social security number (optional) and signature on the fingerprint form?
- ☐ Provide a \$75.00 check or money order made payable to FDLE? Did you sign and completely fill out the check or money order?
- ☐ Include an Attorney's letterhead, if you (applicant) are represented by an attorney?
- ☐ Make copies of your application and documents for your records?
- ☐ For Expunge Applicants only: Is Section B completed and signed by the State Attorney's Office?
- ☐ For Juvenile Expunge Applicants only: Is Section B completed and signed by the State Attorney's Office?

FDLE asks that you provide your social security number (SSN). The decision to provide your SSN is at your option, and if you provide your SSN, FDLE will use it for purposes of identification, and may share the information with other agencies for the same purpose. FDLE's request for your SSN is authorized by state law because use of it is imperative for FDLE to fulfill its lawful duties and responsibilities. Your failure to provide your SSN may result in delay in processing your application or request.