

ATTORNEY APPLICATION FOR APPOINTMENT (SHORT)

ATTORNEY CONTACT INFORMATION:

NAME: _____

BAR CARD #: _____

PHYSICAL ADDRESS OF OFFICE (not a post office box):

MAILING ADDRESS: _____

TELEPHONE #: _____

FAX #: _____

CELL PHONE: _____

E-MAIL ADDRESS: _____

Will you keep your fax machine on between the hours of 8:00 a.m. and 5:00 p.m., Monday
through Friday, except for holidays? YES NO

Year and month licensed to practice law in Texas: _____

Law School: _____ Year graduated: _____

Other relevant education: _____

I. INCLUSION ON THE APPOINTMENT LIST

1. I ask that my name BE CONSIDERED FOR INCLUSION on the list of licensed
attorneys eligible for court appointments in Aransas County, Texas.

II. LICENSE AND CLE BACKGROUND

1. Have you had at least 6 C.L.E. hours in criminal law in the last year?
YES NO

2. Have you had at least 6 C.L.E. hours in juvenile law in the last year?
YES NO

3. Have you completed 3 hours of CLE relating to the representation of a child in a CPS case?

YES NO

4. Have you completed 3 hours of CLE relation to the representation of a parent in a CPS case?

YES NO

III. CRIMINAL AND JUVENILE TRIAL/APPEALS EXPERIENCE

1. Approximately how many misdemeanor defendants have you represented as lead counsel? _____

2. Approximately how many juvenile cases have you handled as lead counsel?

3. Approximately how many family law cases have you handled as lead counsel?

IV. OTHER SKILLS

1. Are you fluent in any language other than English? YES NO

a. If yes, what language(s): _____

V. ETHICS AND PRIOR SANCTION HISTORY DISCLOSURE

1. Have you ever been sanctioned or reprimanded by the State Bar? YES NO

a. If Yes, explain: _____

By my signature below, I swear or affirm that the information I have provided in this application is true and correct.

Attorney's Signature

Subscribed and sworn to before me this ____ day of _____, 20____.

Notary Public, State of Texas

My Commission Expires: _____