

APPLICATION FOR THE
McLENNAN COUNTY DISTRICT COURTS
ATTORNEY APPOINTMENT LIST

Please Complete Both Pages:

Name: _____
Business Address: _____
Home Address: _____

Birth Date: _____
Business Phone: _____
Business Fax: _____
E-Mail Address: _____

- Note: You will receive notification of appointment by mail, e-mail, or fax.

Education:

1. Undergraduate School: _____ Date Graduated: _____
2. Law School: _____ Date Graduated: _____
3. Date licensed to practice law in Texas: _____ Bar Card No: _____
4. Are you fluent in any language other than English? Which language(s)? _____

5. Have you attended the Advanced Criminal Law Course within the last four years?

_____ Yes _____ No

6. Have you had at least eight hours of CLE in Criminal Law in the last calendar year?

_____ Yes _____ No If Yes, where and when _____

7. Have you ever been sanctioned or reprimanded by the State Bar? _____ Yes _____ No

If Yes, explain: _____

Do you have any pending grievances? _____ Yes _____ No

If Yes, explain: _____

EXPERIENCE – GENERAL

Briefly describe your legal experience and the type of law you have practiced including what percentage has been criminal law: _____

EXPERIENCE – CRIMINAL

Have you ever served in a criminal prosecutor's office? _____ Yes _____ No

If Yes, where and when: _____

Have you ever served as the lead counsel in the defense or prosecution of a criminal case?

_____ Yes _____ No If "Yes" how many times? _____ Misd. _____ Felony.

How many *criminal jury trials* have you tried as lead counsel?

_____ Misd. _____ Felony.

In the last 5 years, how many criminal trials have you tried, include the number tried as lead counsel: _____ trials,
_____ as lead counsel.

Have you been lead or co-counsel in a capital murder case where the State was seeking the death penalty?

_____ Yes _____ No If "Yes," please note *case and date*:

First Chair: _____

Second Chair: _____

Check those that apply:

- ☐ Have at least five years experience in criminal litigation.
☐ Have tried to verdict as lead defense counsel a significant number of felony cases (at least 5).
☐ Have trial experience in the use and challenges to mental health or forensic expert witnesses.
☐ Have investigated and presented mitigating evidence at the penalty phase of a death penalty trial.
☐ Have participated in continuing legal education courses or other training relating to criminal defense in death penalty cases.

EXPERIENCE – APPELLATE

Do you want to be assigned to appellate appointments? ☐ Yes ☐ No

Number of briefs filed: _____ Number of Oral Arguments: _____

SPECIAL QUALIFICATIONS:

Are you board certified in criminal law? ☐ Yes ☐ No

Are you licensed to practice in federal court? ☐ Yes ☐ No

If you possess any additional special qualifications to represent criminal defendants, please state them briefly:

AVAILABILITY REQUIREMENTS:

In order to accept appointments from any of the criminal appointment lists, you must (check those with which you comply):

- ☐ Maintain an office with a business phone which is answered by a receptionist or answering service from 8:00 a.m. through 5:00 p.m., Monday through Friday (except for official county holidays);
☐ Have a receptionist or answering service which can promptly notify you of any and all appointments or court hearings;
☐ Maintain a fax number to which faxes can be received 24 hours a day, 7 days a week;
☐ Maintain, or have access to, an office or conference room in which you can meet and interview defendants.
☐ Have an email address to receive all court appointments and notices of court settings

Based on the McLennan County Qualifications, I am qualified to receive and want to accept appointments on the following: (If you check 1st Degree Felony, you will be qualified on all grades of offense below 1st Degree Felony, etc. If you prefer misdemeanor or felony appointments, please note that preference. You may or may not be placed according to that preference.)

Capital Murder: _____
1st Degree Felony: _____
(and Capital Non Death) _____
Felony – 2nd and 3rd Degree: _____
State Jail Felony _____

Writ: _____
Appeals: _____

By my signature I attest that:

- (1) The information I have provided in this application is true and accurate,
- (2) I will comply with the requirements of Article 26.04(j)(1); and
- (3) I will inform the District Court Judges immediately if, at any time, I become unqualified for any appointment list on which I have been placed.

Signature of Applicant

Date