ATTORNEY APPLICATION FOR APPOINTMENT

ATTORNEY CONTACT INFORMATION:

(not a post office box):		
hachine on between the hours of 8:00 a.m. a	and 5:00 p.m., Mono	lay
or holidays?	YES	NO
to practice law in Texas:		
Yea	ar graduated:	
:		
E APPOINTMENT LIST		
name BE CONSIDERED FOR INCLUS	SION on the list of	licensed
ble for court appointments in	County, Texas.	
CLE BACKGROUND		
ed the Advanced Criminal Law Course?	YES	NO
hat year:		
	(not a post office box):	nachine on between the hours of 8:00 a.m. and 5:00 p.m., Mono or holidays? YES I to practice law in Texas:Year graduated:Year graduated:Year graduated:Year graduated:Year BE CONSIDERED FOR INCLUSION on the list of oble for court appointments inCounty, Texas. O CLE BACKGROUND

		a. If yes, what year:				
	3.	Have you had at least 6 C.L.E. hours in criminal law in the	last year?			
			YES	NO		
	4.	Have you had at least 6 C.L.E. hours in juvenile law in the	last year?			
			YES	NO		
v.		CRIMINAL AND JUVENILE TRIAL/APPEALS EXPERIENCE				
	1.	Approximately how many felony defendants have you represented as lead counsel?				
	2.	Approximately how many misdemeanor defendants have y counsel?	ou represented as	lead		
	3.	Approximately how many juvenile cases and family law ca				
		counsel?				
	4.	Do you have experience in appellate brief writing and/or w	rit applications?			
			YES	NO		
v.		OTHER SKILLS				
	1.	Are you fluent in any language other than English?	YES	NO		
		a. If yes, what language(s):				
II.		ETHICS AND PRIOR SANCTION HISTORY DISCLOSURE				
]	1.	Have you ever been sanctioned or reprimanded by the State	e 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: _____