ATTORNEY'S APPLICATION/AFFIDAVIT

Criminal Courts Attorney Appointment List

PLE.	ASE COMPLETE THIS ENTIRE PAGE	Date:							
Busir	e:ess:								
Homo	e Phone:	Fax No.:							
E-ma	iil Address:	*Note: You will receive notification by fax or mail.							
<u>EDU</u>	CATION								
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 ten 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?Y If yes, explain:								
EXP	ERIENCE-GENERAL								
	Ty describe your legal experience and the type of law nal law:	you have practiced including what percentage has been							
EXP	ERIENCE-CRIMINAL								
	e you ever served in a criminal prosecutor's office?								
Have	you ever served as the lead counsel in the defense or Yes No If "yes", now many tin								

How many criminal jury trials hav	-		ast 12 months:			
Have you ever tried a capital murd					lty?	
Check those that apply:						
Have at least five years o	f experience in cri	iminal litig	gation.			
Have tried to verdict as le	ead defense couns	el a signif	cant number o	of felony o	cases (at least 5-10).	
Have trial experience in t	the use of and chal	llenges to	mental health	or forensi	c expert witnesses.	
Have investigated and pr	esented mitigating	evidence	at the penalty	phase of	a death penalty trial.	
Have participated in cont death penalty cases.	inuing legal educa	ation cours	ses or other tra	ining rela	ating to criminal defe	ense in
EXPERIENCE-APPELLATE						
Do you want to be assigned appel Number of briefs filed:_			Yes of oral argun			
SPECIAL QUALIFICATIONS						
Are you board certified in crimina Are you licensed to practice in fec If "yes", are you on the " If you possess any additional spec	leral court? A" list or "B" list?		Yes Yes Yes "A"			efly:
Based on Wharton County qualifi	cations, I am quali	ified to rec	eive and want	to accept	t appointments on the	e
Felony	3g/1st				enile	
	2nd/3rd			App		
Felony Do you want to be listed as a Spar		rnav?	Yes		demeanor No	
Do you want to be listed as a spai	iisii-speakiiig attoi	incy:	105		1\0	
By my signature, I attest that the i	nformation I have	provided	in this applica	tion is tru	e and accurate.	
Date	te Signature of Applicant					
Subscribed and sworn to before m	e on the	(lay of		, 2	.0
				Nota	ary Public	