

ATTORNEY APPLICATION FOR APPOINTMENT LIST(S)

ATTORNEY CONTACT INFORMATION:

NAME: _____

BAR CARD #: _____

RESIDENCE ADDRESS: _____

COUNTY OF RESIDENCE: _____

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

MAILING ADDRESS: _____

BUSINESS TELEPHONE #: _____

(Must have voice mail capability)

FAX #: _____

CELLULAR PHONE: _____

E-MAIL ADDRESS: _____

Do you maintain a law office in any county other than Gregg County? YES NO

Will you be available by email and/or fax machine between the hours of 8:00 a.m. and 5:00 p.m.,

Monday through Friday, except for holidays? YES NO

Month and year you were licensed to practice law in Texas: _____

Law School: _____ Year graduated: _____

Other relevant education: _____

I. INCLUSION ON THE APPOINTMENT LIST

I am applying to be considered for the following appointments:

- | | | |
|--|-----|----|
| 1. 1 st , 2 nd Degree Felonies | YES | NO |
| 2. Misdemeanor, State Jail and 3rd Degree Felonies and Violations of Probation | YES | NO |
| 3. Appeals | YES | NO |

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

III. CRIMINAL AND APPEALS EXPERIENCE

1. How many misdemeanor criminal cases tried to verdict? _____

2. How many felony criminal cases tried to verdict? _____

3. How many appellate briefs have you written? _____

4. I have practiced **criminal law** for _____ years and _____ months.

IV. OTHER SKILLS

1. Are you, or a member of your staff, fluent in any language other than English?

YES NO

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

2. Do you have specialized training in defending mental health cases? YES NO

3. Please describe anything that you wish to include for consideration that you feel makes you uniquely qualified to accept appointments in criminal cases (e.g. participation in criminal law mentoring or peer review programs):

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: _____

REQUIRED ATTACHMENTS

Your application will not be complete until you submit the following item:

- 1. Your most recent annual CLE report from the State Bar.

RETURN COMPLETED APPLICATION AND REQUIRED ATTACHMENTS TO:

Via Postal Mail to:

Judge Alfonso Charles
124th District Court
101 E. Methvin Street, Suite 447
Longview, Texas 75601

Via Email to:

alfonso.charles@co.gregg.tx.us