

APPLICATION FOR INCLUSION ON QUALIFIED ATTORNEY LISTS:

NAME: _____ BAR NUMBER: _____

BUSINESS ADDRESS: _____

BUSINESS PHONE: _____ CELLPHONE: _____

FAX NUMBER: _____ E-MAIL ADDRESS: _____

I understand that I must be available by FAX and E-Mail to receive notifications of appointment and must be able to be reached by the Court or Prosecutor by phone, pager, or voice mail from 8-Noon and Noon- 5 pm every weekday.

I understand and agree that I will contact my client within 24 hours of receiving notification of my appointment and will personally visit my client within 3 working days if my client is incarcerated.

Date Licensed to Practice in Texas: _____

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

If "Yes", explain: _____

Do you have any grievances pending? Yes No

If "Yes," explain: _____

Date of Certification in Criminal Law: _____

Continuing Legal Education related to Criminal Law, Evidence, Ethics or Trial Tactics

Name & Location of Course	Date	Hrs. Credit
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Years experience in criminal litigation _____

Type of Experience	Case Names	Date Concluded
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Felony cases tried to verdict before a jury

1. _____
2. _____
3. _____

Misdemeanor cases tried to verdict before a jury:

1. _____
2. _____
3. _____
4. _____
5. _____

Briefs filed and/or argued to an appellate court, if applying to the Appellate and Writ List:

Case Name	Court	Date Concluded:
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

If applying for the Capital List, please include the following:

Capital murder trials tried to a verdict

1. _____
2. _____

Cases in which I have used /challenged use of health or forensic experts:

1. _____
2. _____

Continuing Education Related to Death Penalty: _____
Title Date

Felony cases tried to verdict before a jury

1. _____
2. _____
3. _____
4. _____
5. _____

I hereby make application for inclusion on the list of Qualified Attorneys for Appointment in the following category(s) of cases:

- Capital Murder w/ DP**
- Felony (1st Deg & Non-Death Cap)**
- Felony (2nd Deg & 3rd Deg)**
- State Jail & Misdemeanors**
- Writs and Appeals**
- Revocations of Probation**
- Juveniles**

I prefer to be appointed only in _____ County Court at Law _____ District Court

I am qualified to receive and I want appointments in the above categories. I understand that if I check Felony 1st degree, I will be qualified and will receive appointments for all Felony 1, 2nd, 3rd and State Jail offenses. I understand that I may indicate that I wish only County Court at Law or only District Court appointments.

I further agree to abide by the Canons of Ethics and the Lawyer's Creed. I also agree to require all persons retained or employed by me to also abide by all Canons and Lawyer's Creed.

By my signature, I attest that the information I have provided in this application is true and correct.

Signature of Applicant

Date