



Office of the Criminal District Attorney

Kendall County, Texas

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or disability.

Position: LAW STUDENT INTERN

Instructions: Email scanned and **hand-signed** application, resume and official transcript to Kendall County CDA cda@co.kendall.tx.us
No electronic or typewritten signatures are permitted.

APPLICANT

Date: _____

Last Name	First Name	Middle Name	Other Last Names
CURRENT ADDRESS: _____			
City, State, and Zip: _____			
PERMANENT ADDRESS: _____			
City, State, and Zip: _____			
Phone: _____		Email: _____	

EDUCATION

Institution Name and Location	Specialty	Grade Point	Rank
HighSchool: _____			
UnderGrad: _____			
UnderGrad: _____			
PostGrad: _____			
LawSchool:* _____			

* Official Transcript Required

QUALIFICATIONS

Date(s) you have taken the Texas/other **Bar Exam**: _____ Date passed **MPRE**: _____

Date licensed as an attorney: _____ Texas Bar Number: _____

If not, when do you plan to take the Texas Bar Exam? _____

If you have not yet graduated from law school, how many hours do you have to date? _____

- Please mark all that apply:**
- | | | |
|--|---|---|
| <input type="checkbox"/> moot court team | <input type="checkbox"/> moot court participation | <input type="checkbox"/> mock trial team |
| <input type="checkbox"/> mock trial participation | <input type="checkbox"/> trial advocacy course | <input type="checkbox"/> trial advocacy awards |
| <input type="checkbox"/> criminal judicial clerkship | <input type="checkbox"/> criminal clinic | <input type="checkbox"/> actual jury trial experience |

Have you ever **interned** at a District Attorney's Office? Yes No If yes, when and with whom? _____

Have you ever interned at a County Attorney's Office? Yes No If yes, when and _____

Have you ever **been employed** in the criminal justice system? Yes No If yes, which _____

List people you know who work for at a District or County Attorney's Office: _____

List people you know who work for a Public Defender's Office: _____

List **law enforcement training** or experience you have had: _____

List **languages** besides English that you speak write fluently: _____

Are you legally authorized to work in the United States? Yes No

LAW VIOLATIONS

IMPORTANT TO NOTE: Law violations will not necessarily disqualify you from employment consideration. Violations will be evaluated based on factors including the nature and gravity of the offense or conduct, the time that has passed, and the nature of the position.

Have you ever been arrested, charged, or convicted for any offense anywhere other than minor traffic violations?

Yes No If yes, please explain each and every occurrence.

Are you or any of your relatives, friends, or acquaintances **currently charged with a criminal offense or under investigation** for a criminal offense?

Yes No If yes, please explain.

EMPLOYMENT HISTORY – LIST ALL EMPLOYMENT (do not refer to resume)

Current Employer:	Salary:	Title:	Yrs:	From:	To:
Reference:	Address:	Phone:	Email:		
Responsibilities:					
If necessary, is it okay to contact current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Employer:	Salary:	Title:	Yrs:	From:	To:
Reference:	Address:	Phone:	Email:		
Responsibilities:					
Reason for leaving this employment:					
Employer:	Salary:	Title:	Yrs:	From:	To:
Reference:	Address:	Phone:	Email:		
Responsibilities:					
Reason for leaving this employment:					
Employer:	Salary:	Title:	Yrs:	From:	To:
Reference:	Address:	Phone:	Email:		
Responsibilities:					
Reason for leaving this employment:					

If needed, go to [ADDITIONAL OPTIONAL ATTACHMENT](#) for More Work History

ACKNOWLEDGEMENT AND SIGNATURE

Candor in the Application Process. I verify that all of the information on this application and on resumes and exhibits submitted to the Kendall County District Attorney’s Office is true, correct, and complete. I have not omitted any information sought by the Kendall County Criminal District Attorney’s Office. I understand that any false, misleading, incomplete or omitted information on this application or in resumes and exhibits submitted to the Kendall County Criminal District Attorney’s Office will result in ineligibility for employment or termination of employment, whenever discovered.

Application and Interview Do Not Constitute an Offer. I understand that neither the acceptance of this application by the Kendall County District Attorney’s Office nor the granting of an interview with the Kendall County District Attorney’s Office constitute a job offer, an employment contract, or any entitlement to benefits from anyone. No promises regarding employment have been made to me and I understand any such promise or guarantee, if made, is not binding upon the Kendall County Criminal District Attorney unless made in writing.

Background Checks and Release of Liability. I hereby authorize the Kendall County District Attorney’s Office to conduct work history, personal reference and criminal history record inquiries to determine my acceptability for employment. I hereby release previous employers and related sources from any legal liability for information they provide regarding my suitability for employment.

Employment is At-Will. I acknowledge that no consideration has been furnished to anyone for my employment other than my services. I understand that my employment relationship with the Kendall County Criminal District Attorney is at-will.

Date: _____ Applicant Signature: _____

Applicant Printed Name: _____

Interviewer and Date:



Office of the Criminal District Attorney

Kendall County, Texas

BACKGROUND CHECK RELEASE AND WAIVER

I hereby authorize the Kendall County District Attorney's Office to conduct a background investigation including work history, personal reference and criminal history record inquiries to determine my acceptability for employment, and hereby release the Kendall County District Attorney's Office from any liability arising from the background investigation.

I understand that I must pass the background investigation in order to be considered for appointment in the Kendall County Criminal District Attorney's Office. If I do not pass the background investigation, I understand that I will no longer be considered for employment.

I understand that if the Kendall County Criminal District Attorney's Office concludes that there is disqualifying information as a result of a background investigation, if there is an offer of employment it will be withdrawn and I will be subject to immediate dismissal. I also understand that if I falsified or omitted required information, or failed to cooperate with reasonable investigations related to my application for this position, my employment may be terminated.

NAME (PLEASE PRINT) _____

SIGNATURE (NO TYPING OR ELECTRONIC) _____

DATE _____

AUTHORIZATION TO RELEASE INFORMATION

As an applicant for a position with the Office of the Kendall County Criminal District Attorney, I am required to furnish information for use in determining my qualifications for this position. In this connection, I authorize any individual, firm, corporation, or public agency including any former or current employer to release all information that the individual, firm, corporation, or public agency including any former or current employer may have concerning me, including information of a confidential or privileged nature, and to provide copies of documents as may be required by the Kendall County Criminal District Attorney's background investigator.

I hereby release you, your organization, or others from liability or damage that may result from providing the information requested. This authorization expires one year after the date signed.

NAME (PLEASE PRINT) _____

SIGNATURE (NO TYPING OR ELECTRONIC) _____

DATE _____

BACKGROUND CHECK INFORMATION

APPLICANT

Date: _____

Last Name First Name Middle Name Other Last Names

CURRENT ADDRESS: _____

City, State, and Zip: _____

PERMANENT ADDRESS: _____

City, State, and Zip: _____

Phone: _____ Email: _____

Date of Birth: _____ Place of Birth: _____

Social Security Number: _____ Driver License Number: _____

Issuing State: _____

Social Media Accounts (include your account name):

Facebook _____ Twitter _____ Instagram _____ Other _____