

## APPLICATION TO RECEIVE COURT APPOINTMENTS

I, the undersigned attorney, hereby apply to the Judges of the County Courts at Law Of Collin County, Texas to receive appointments to represent indigent persons charged with criminal offenses in misdemeanor cases. I certify that I meet one of the following requirements established by the Judges to receive appointments in misdemeanor cases:

1. I am a licensed attorney in good standing with the State Bar of Texas and I am Board Certified in Criminal Law by the Texas Board of Legal Specialization;

or

2. I am a licensed attorney in good standing with the State Bar of Texas, I have been practicing law for at least two years, I have tried three criminal cases during my career to a jury either as the first or second chair attorney and I have completed at least sixteen hours of CLE in criminal law during the twenty four month period preceding the date of this application;

or

3. I am applying under the "other criteria" section of The Interim Collin County Misdemeanor Indigent Defense Plan.

I further certify that I am familiar with the requirements of Texas Senate Bill 7 (The Fair Defense Act) and that I will comply with all of the duties and requirements of the Act in representing my clients in the cases in which I am appointed.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_\_\_\_.

\_\_\_\_\_  
Signature

### ORDER APPROVING APPLICATION

After considering the foregoing application, the County Court at Law Judges of Collin County, whose signatures appear below, are of the opinion that it should be granted, that the applicant is qualified to receive appointments in county court cases and that the applicant's name shall be added to the list from which selection of appointed counsel is to occur in misdemeanor cases.

\_\_\_\_\_  
Judge, County Court at Law No. 1

\_\_\_\_\_  
Judge, County Court at Law No. 3

\_\_\_\_\_  
Judge, County Court at Law No. 2

\_\_\_\_\_  
Judge, County Court at Law No. 4

\_\_\_\_\_  
Judge, County Court at Law No. 5

(Please complete the information on the reverse.)

APPLICATION TO RECEIVE COURT APPOINTMENTS

Printed name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State and Zip: \_\_\_\_\_

Office telephone number: \_\_\_\_\_

Office fax number: \_\_\_\_\_

Email address: \_\_\_\_\_

State Bar No.: \_\_\_\_\_

Date Licensed: \_\_\_\_\_

Languages spoken other than English: \_\_\_\_\_

Complete one of the following:

1. Date of Board Certification in Criminal Law: \_\_\_\_\_

or

2. Style and Cause Numbers of three criminal jury trials tried as first or second chair in a county or district court during your legal career and the name of the criminal law CLE courses completed during the preceding twenty four months totaling at least sixteen hours:

Jury trials:

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

CLE:

---

---

---

or

3. Other criteria which you believe should be considered, including but not limited to, years of legal experience, board certification in fields of law other than criminal law, number of civil and criminal trials completed, hours of continuing legal education completed and professional reputation for handling criminal cases.

---

---

---

---

---