CJA INVESTIGATOR APPLICATION

GENERAL INFORMATION:

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<td>1. FULL NAME:</td>
<td>2. SOCIAL SECURITY NUMBER:</td>
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<td>3. PLACE OF BIRTH:</td>
<td>4. DATE OF BIRTH:</td>
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<td>5. ADDRESS:</td>
<td>6. PHONE NUMBERS:</td>
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<td>NIGHT: ______________________________</td>
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<td>7. E-MAIL ADDRESS:</td>
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INVESTIGATIVE EXPERIENCE:

8. Are you currently employed as an investigator? (Please circle) Yes No
   If yes, how long have you been employed as an investigator? __________
9. If you have previously worked as an investigator, please attach to this application the contact information for the last five attorneys for whom you completed an investigation.
10. Do you work full or part-time as an investigator? ______________
11. What has been your primary casework? (Please circle) Felony Misdemeanor CCAN
12. Have you testified in court? (Please circle) Yes No
    If yes, how many times? __________
13. Have you ever taken a verbatim written statement from a witness? (Circle) Yes No
    If yes, how many times? __________
14. Have you ever been a defense investigator in any other jurisdiction? (Circle) Yes No
    If yes, please list which jurisdictions: _______________________________________
    _____________________________________
15. Have you taken any relevant continuing education training courses since becoming an investigator? (Please circle) Yes No NA
    If yes, please indicate the date of the training, substance, length, and sponsor.

BACKGROUND INFORMATION:

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<td>15. During the last 10 years, have you been convicted, imprisoned, on probation, or on parole in the United States? (Includes felonies, firearms or explosives violations, misdemeanors and all other offenses). If yes, please attach an explanation.</td>
<td>Yes No</td>
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<td>16. Are you currently under investigation by any law enforcement agency, or do you have any pending criminal cases in the United States? If yes, please attach an explanation to this application.</td>
<td>Yes No</td>
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1 Please submit completed applications to the Defender Services Branch in the D.C. Superior Court Budget and Finance Office Attn: Wallace Lewis, located at 616 H Street NW (Gallery Place) on the 6th Floor
ADDITIONAL INFORMATION:

Please attach the following to this application form:

18. A copy of your valid driver’s license, state identification card or other proof of identity.

19. A District of Columbia Metropolitan Police Department (MPD) “Police Clearance.” A police clearance may be obtained from MPD at 300 Indiana Avenue, NW, Room 3055, Washington, DC. Please be advised that any conviction(s) and/or arrest(s) reflected on this preliminary background check may be sufficient to disqualify an applicant from consideration.

20. Proof of submission to the Federal Bureau of Investigation (FBI) a request for background check (proof may consist of electronic submission receipt, certified mail receipt, etc.). Please note that the results of FBI background checks may take up to 12 weeks.

21. Three work-related or academic references. Please include the reference’s name, title, telephone number, agency/company name and address, and your relationship with each particular reference. Please indicate if you wish to be notified before your references are contacted.

22. A writing sample. The writing sample must be between 250 and 500 words in length. The writing sample will be evaluated along with the final exam, but should be included with this application. Please discuss what investigative steps you would plan to take in response to the following hypothetical case:

   Your attorney’s client is charged with robbery and assault with a dangerous weapon. These charges arose from a shooting which occurred at a liquor store on 8th and Pennsylvania, S.E., approximately one week ago. From your attorney you know that an ambulance was summoned to the scene and that the complaining witness was recently released from the hospital. The complaining witness’ name is John Doe and your attorney believes he lives in Southeast Washington. The client is currently locked up at D.C. Jail.

23. A copy of your High School Diploma, or proof of a GED, or a statement that you are applying as an otherwise qualified candidate based on past work experience as an investigator.


CERTIFICATION:

I certify, to the best of my knowledge and belief, that all of the information in this application, including the attached materials and any other materials that I have submitted for the position for which I am applying, is true, correct, and complete, and that the application is made in good faith. I understand that a false or fraudulent answer to any question on any part of this declaration or its attachments, or any other papers submitted, may be grounds for disqualification for certification. I understand that any information I give may be investigated for purposes of determining eligibility. I consent to the release of information about my ability and fitness pursuant to the Guidelines for Investigators in the Superior Court for the District of Columbia (‘DCSC’s Investigator Guidelines’). I further understand that if selected to the CJA/CCAN Investigator Panel I am committed to being assigned to at least 4 cases per year. I also hereby acknowledge having read the DCSC’s Investigator Guidelines, and agree to abide by its terms.

Applicant’s Signature __________________________ Date __________