STATE OF TEXAS

COUNTY OF LUBBOCK

APPLICATION TO BE PLACED ON PUBLIC APPOINTMENT LIST FOR LUBBOCK COUNTY

	the OF low ded 30
LOCAL RULES OF LUBBOCK COUNTY FOR THE TIMELY AND FAIR APPOINTMENT COUNSEL FOR INDIGENT DEFENDANTS, and I do hereby swear or affirm that the be information is true and accurate. Should any change in this information occur, I will filed an Amen Application with the applicable Administrative District Court or County Court-at-Law Judge within days of the change. REQUEST I,	OF low ded 30
COUNSEL FOR INDIGENT DEFENDANTS, and I do hereby swear or affirm that the be information is true and accurate. Should any change in this information occur, I will filed an Amen Application with the applicable Administrative District Court or County Court-at-Law Judge within days of the change. REQUEST I,	low ded 30
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	lify
CATEGORY A (FELONY):	
(A-1) FIRST DEGREE FELONY	
(A-2) SECOND DEGREE FELONY (3G VIOLENT)	
(A-3) SECOND DEGREE FELONY (NON-VIOLENT)	
(A-4) THIRD DEGREE FELONY	
(A-5) STATE JAIL FELONY	
(A-6) APPELLATE (FIRST AND SECOND DEGREE FELONY - SUBMIT A BR	EF
YOU HAVE AUTHORED)	
CATEGORY B (MISDEMEANOR):	
(B-1) CLASS AA,@ AB@ AND AC@	
CATEGORY C (JUVENILE):	
(C) JUVENILE	
CLASS D (WRITS):	
(D-1) WRITS OF HABEAS CORPUS	
(D-2) WRIT CATEGORY (POST-CONVICTION)	
CLASS E (SPECIAL LANGUAGE):	
(E) SPECIAL LANGUAGE APPOINTMENT (SPECIFY LANGUAGE):	

QUALIFICATION

I,	_, swear or affirm that my qual	ifications are as follows:
Exact Date Licensed to Practice Law in To		
D C IN I		
Number of Years of Practice of Criminal	Law:	
Approximate Number of Jury Trials Tried	<u>l:</u>	
Board Certification:		ct Date:
Criminal Law CLE (last 12 months):		
Course:	Exact Date:	<u>Hours:</u>
Regarding the qualifications to represent above, I summarize hereafter my experier Defendant=s Name:	nce (if first time applicant or cl	necking to raise level):
Offense:		
Defendant=s Name:		
Offense:		
Defendant=s Name:		
Offense:	Date:	Chair Rank:
Have you ever been found or held to be in If Ayes,@ attach separ	neffective counsel in the repres	
· · · · · · · · · · · · · · · · · · ·		r authority of any other state)? f a private sanction, the attorney
may request sealing of such sanction).		

I have malpractice insurance? (yes/no)						
List other qualifications you deem appropriate for consideration: OATH						
Address	of		Attorney:			
Phone #:E-mail Address:						
Sworn and subscribed before, 20		this	day of			
My Commission Expires:		Notary Public				
ORD	DER OF APPROVAL/DISA	APPROVAL				
It is hereby ORDERED , by a n AApplication to be Place	on Public Appointment be, and the same is and DIS	nt List of Lubbock hereby APPROVED a	County@ of			
SIGNED this day or		<u></u> .				
ADMINISTRATIVE JUDGE DISTRICT COURTS		STRATIVE JUDGE Y COURTS-AT-LAW				