



# Seattle City Attorney

Ann Davison

## Criminal Division Volunteer/Externship/Internship Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

Email Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

School: \_\_\_\_\_ Major: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Emergency Contact Name & Phone: \_\_\_\_\_

### Education:

#### Completed

- High school/ GED
- Vocational/ Business School
- College
- Graduate School
- Law School

#### Currently Enrolled

- College Circle current standing:  
Fr So Jr Sr
- Graduate School
- Law School Circle current standing:  
1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup>
- Vocational/ Business School

Additional Training: \_\_\_\_\_

Languages Spoken Fluently: \_\_\_\_\_

Volunteer Experience: \_\_\_\_\_

Please state your career goals: \_\_\_\_\_

The Criminal Division may have opportunities available in the following areas. Please check your areas of interest.

- |   |   |
|---|---|
| <input type="checkbox"/> Crimes against the elderly       | <input type="checkbox"/> Assistant Paralegal                                      |
| <input type="checkbox"/> Domestic Violence Unit           | <input type="checkbox"/> Rule 9 Internship<br>(3rd year law school/J.D. students) |
| <input type="checkbox"/> Child abuse cases                |   |
| <input type="checkbox"/> Research and statistical reports |   |

It is our goal to match your interests and skills with the needs of this office. However, assignment of specific tasks will be at the discretion of the supervisor.

Why are you interested in volunteering in the Criminal Division?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your knowledge of, or experience with, the criminal justice system.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_

If yes, when and where? \_\_\_\_\_

How did you learn of this opportunity? \_\_\_\_\_

**Complete the following if you are expecting to receive course credit:**

Professor or contact person: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Course or Major: \_\_\_\_\_

The office is open between the hours of 8:00 am and 5:00 pm Monday through Friday.

Indicate when you are available.

Days:    Monday            Tuesday            Wednesday            Thursday            Friday  
          \_\_\_\_\_ to \_\_\_\_\_    \_\_\_\_\_ to \_\_\_\_\_    \_\_\_\_\_ to \_\_\_\_\_    \_\_\_\_\_ to \_\_\_\_\_    \_\_\_\_\_ to \_\_\_\_\_

Total number of hours you are available per week: \_\_\_\_\_

Expected start date: \_\_\_\_\_ Expected end date: \_\_\_\_\_

**You will need to attach the following to your application. We are unable to process incomplete applications.**

- 1. Current resume
- 2. List of three professional references with contact information

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please send your completed application materials to:**

Brialle Engelhart, Criminal Division Manager  
Seattle City Attorney's Office  
701 Fifth Avenue, Suite 2050  
Seattle, WA 98104  
Phone: (206) 684-7731    Fax (206) 684-4648  
Email: Brialle.Engelhart@seattle.gov