

Criminal Division Volunteer/Externship/Internship Application

| Name: | Date: | | | |
|---------------------------------|------------------------------|--|--|--|
| Address: | | | | |
| Email Address: | Phone: | | | |
| School: | Major: | | | |
| Emergency Contact Name & Phone: | | | | |
| Education: | | | | |
| <u>Completed</u> | Currently Enrolled | | | |
| High School / GED | College | | | |
| Vocational / Business School | Year (Fr So Jr Sr) | | | |
| College | Graduate School | | | |
| Graduate School | Law School | | | |
| Law School | Year (1L 2L 3L) | | | |
| | Vocational / Business School | | | |
| Additional Training: | | | | |
| Languages Spoken Fluently: | | | | |
| Volunteer Experience: | | | | |
| Please state your career goals: | | | | |

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

Domestic Violence Unit Victim Advocate Paralegal

Mainstream Victim Advocate Rule 9 Internship

Research and Statistical Reports (3rd year law school / JD students)

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? (Y/N) 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 Ma | .jor: | | | | | | |
| | open between you are availa | | am to 5:00pm Mon | day through Frida | y. Please | | |
| Days: Example 8 to 5 | Monday | Tuesday | Wednesday | Thursday | Friday | | |
| Total number | of hours you a | are available per v | week: | | | | |
| Expected Star | pected Start Date: Expected End Date: | | | | | | |
| We are unab 1. Currer | le to process in tresume | following to your incomplete appli | cations. | | | | |
| 2. List of | f three professi | ional references v | with contact information | ation | | | |
| Signature: | | | Date: | | | | |
| Please email | your complet | ed application m | naterials to: | | | | |
| • | attorney's Offic arce Departme | | | | | | |
| Phone: (206) Fax: (206) 68 Email: Law_I | | υV | | | | | |
| Subject Line: | Criminal Divi | sion Volunteer/ F | Externshin /Internsh | nin Application | | | |