

**TEXAS FAIR DEFENSE ACT  
HARRIS COUNTY DISTRICT COURTS**

---

**APPLICATION  
REASSESSMENT OF COURT APPOINTMENT LEVEL  
MAY, 2010**

**NOTE: This application is for attorneys who are currently approved for felony appointments and wish to have their appointment level reconsidered.**

**CAVEAT:** After reviewing the completed application, the board of judges may: 1) upgrade applicant's classification; 2) downgrade applicant's classification; 3) leave applicant's classification unchanged; or 4) remove applicant from the Master List. (See Standards and Procedures 5.7).

Follow the instructions in each section carefully. Please ensure that your responses are legible.

You must submit a **signed and notarized** application to the Administrative Office of the District Courts located at 1201 Franklin, 7th Floor, **by 5:00 p.m. on April 30, 2010.**

**Late applications will not be accepted.**

**Those interested in accepting Capital appointments must take and pass the Online Capital Certification EXAM which is scheduled for 5/7/2010 from 1p-4p. at 1201 Franklin 7<sup>th</sup> Floor Administration Office. If interested, please sign up in the Administration Office AFTER you return the application packet.**

Information about each court's appointment procedures and requirements for term attorneys is available from the Administrative Office of the District Courts at 1201 Franklin, 7th Floor. This information is also provided on the Harris County District Courts' Fair Defense Act web site at [www.justex.net](http://www.justex.net). Click on the Fair Defense Act Management System link.

If you have any questions about the application or the application process, please call the Administrative Office at 713-755-6575.

**Required Application Attachments**

1. A recent electronic photograph (jpeg format) of yourself. No hard copy photos will be accepted. Photos must be in JPEG format and submitted on a CD or thumb drive. The administrative office will not take photos.
2. Your **most recent** annual CLE report from the State Bar.
3. An electronic copy of an appellate brief or a post-conviction writ you authored and filed. **(Only required if applying for appellate appointments.)** Hard copies will not be accepted. They must reside on the same CD/thumb drive as the photo.
4. Any other documents specified in the application.

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

**TEXAS FAIR DEFENSE ACT  
HARRIS COUNTY DISTRICT COURTS  
APPLICATION FOR REASSESSMENT OF APPOINTMENT LEVEL  
May, 2010**

**PART A  
INFORMATION & EXPERIENCE  
(REQUIRED OF ALL APPLICANTS)**

**ATTORNEY CONTACT INFORMATION (Please Print Very Clearly):**

*TITLE:* \_\_\_\_\_

*LAST NAME:* \_\_\_\_\_

*LAST NAME IN JIMS:* \_\_\_\_\_

*(if different)*

*FIRST NAME:* \_\_\_\_\_

*BAR CARD #:* \_\_\_\_\_ *SPN:* \_\_\_\_\_

*PHYSICAL ADDRESS:*  
*(not a P.O. Box)* \_\_\_\_\_

*CITY:* \_\_\_\_\_ *ZIP:* \_\_\_\_\_

*MAILING ADDRESS:* \_\_\_\_\_

*CITY:* \_\_\_\_\_ *ZIP:* \_\_\_\_\_

*TELEPHONE #:* \_\_\_\_\_ *FAX #:* \_\_\_\_\_

*PAGER #:* \_\_\_\_\_ *CELL PHONE #:* \_\_\_\_\_

*E-MAIL ADDRESS:* \_\_\_\_\_

| <b>Check all appointments for which you are:</b> | <b><u>CURRENTLY</u><br/>approved</b> | <b><u>APPLYING FOR</u><br/>approval</b> |
|--|--------------------------------------|---|
|--|--------------------------------------|---|

- |                                       |                          |                          |
|---------------------------------------|--------------------------|--------------------------|
| 1. Capital Cases – First Chair        | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Capital Cases – Second Chair       | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Capital Appeals                    | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. 1st-Degree Felonies                | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. 2nd-Degree Felonies                | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. 3rd-Degree Felonies/STJF/MRPs/MAJs | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Non-Capital. Appeals               | <input type="checkbox"/> | <input type="checkbox"/> |

\_\_\_\_\_ 8. As of the date of this application, how many years have you been in practice?

9. Did your name appear on the Fair Defense Act Ballot, either as a new candidate or reassessment candidate, last year? (**circle only one choice below**)

**Yes – as a new candidate**

**Yes – as a reassessment candidate**

**No – my name did not appear on the Fair Defense Act Ballot last year**

**ATTORNEY TRIAL EXPERIENCE**

---

Please read each question carefully. Your answers must add up as indicated below. Although you may estimate your response, the response must be in **discrete numbers** (i.e., 4, 12, 31). **Do not answer in ranges** (i.e., 5-10, 10-50). **Do not answer** with phrases such as “more than 20” or “at least 100”. If answers are not in the appropriate format, the processing of your application will be delayed.

**Questions 10-19.** These questions refer to the number of **criminal cases you have tried to conclusion before a jury**. This number should include hung juries, but exclude agreed competency hearings. Include **all** criminal cases you have tried either in Harris County, another county, or Federal Court.

**FELONY EXPERIENCE**

- \_\_\_\_\_ 10. As **first chair**, how many felony criminal cases have you tried to conclusion before a jury?
- + \_\_\_\_\_ 11. As **second chair**, how many felony criminal cases tried to conclusion before a jury?
- = \_\_\_\_\_ 12. **How many total felony criminal cases have you tried to conclusion before a jury. (Add the number you entered for Question 10 to the number you entered for Question 11.)**

**FEDERAL EXPERIENCE**

- \_\_\_\_\_ 13. As **first chair**, how many federal criminal cases have you tried to conclusion before a jury?
- + \_\_\_\_\_ 14. As **second chair**, how many federal criminal cases have you tried to conclusion before a jury?
- = \_\_\_\_\_ 15. **How many total federal cases have you tried to conclusion before a jury? (Add the number you provided in Question 13 to the number you entered for Question 14.)**

**MISDEMEANOR EXPERIENCE**

- \_\_\_\_\_ 16. As **first chair**, how many misdemeanor criminal cases have you tried to conclusion before a jury?
- + \_\_\_\_\_ 17. As **second chair**, how many misdemeanor criminal cases have you tried to conclusion before a jury?
- = \_\_\_\_\_ 18. **How many total misdemeanor criminal cases have you tried to conclusion before a jury? (Add the number you provided in Question 16 to the number you entered for Question 17.)**

**TOTAL CRIMINAL EXPERIENCE**

- \_\_\_\_\_ 19. **What is the total number of criminal cases you have tried to conclusion before a jury? (Add the total numbers from Question 12, Question 15 and Question 18.)**

**RECENT EXPERIENCE**

- \_\_\_\_\_ 20. Of the total cases cited in Question 18, how many criminal cases have you tried to conclusion before a jury **in the last five (5) years?**

**PART B**  
**APPELLATE EXPERIENCE**  
**(TO BE COMPLETED ONLY BY APPLICANTS SEEKING APPELLATE APPOINTMENTS)**

- \_\_\_\_\_ 21. How many appellate briefs or post-conviction writs have you authored? (Exclude any subcontracted briefs.) Attach an electronic copy of an appellate brief / writ you wrote.

**PART C**  
**CAPITAL MURDER**  
**(TO BE COMPLETED ONLY BY APPLICANTS SEEKING CAPITAL APPOINTMENTS)**

If you are seeking approval for **first-chair capital murder appointments** (death or non-death capitals), you must certify that you have tried at least **two (2) death penalty cases** to verdict as first or second chair. At least one of those cases must be as defense counsel unless you have been in practice as defense counsel for at least five years. Please list the two cases below:

| DEFENDANT'S NAME | COURT/JUDGE | YEAR OF TRIAL |
|------------------|-------------|---------------|
| 22. _____        | _____       | _____         |
| 23. _____        | _____       | _____         |

24. Are you currently approved by the 2nd Administrative Judicial Region of Texas for:  
(circle all that apply)

**Yes**   **No**   1st-Chair Capital appointments

**Yes**   **No**   2nd-Chair Capital appointments

**Yes**   **No**   Capital Appeals appointments

25. Have you ever been found by a court to have rendered ineffective assistance of counsel?

**Yes**   **No**

|                              |
|------------------------------|
| <b>PART D<br/>REFERENCES</b> |
|------------------------------|

Please provide the names and contact information for at least **three (3)** references. References should be either judges you have tried cases before or attorneys who know your practice. You must provide at least **one (1)** of each type of reference (i.e., either 2 judges and 1 attorney, or 1 judge and 2 attorneys). You must also list the month and year of the most recent case you tried in each judge's court.

| Name | Judge/Attorney | Phone Number | Date  |
|------|----------------|--------------|-------|
| 26.  | _____          | _____        | _____ |
| 27.  | _____          | _____        | _____ |
| 28.  | _____          | _____        | _____ |

**PART E**  
**REQUEST FOR REASSESSMENT**  
**(REQUIRED OF ALL APPLICANTS)**

29. Please explain in detail why you are requesting that your appointment level be reassessed. Be specific about which of your qualifications have changed since your original application. If you have applied for a reassessment before, be specific about how your qualifications have changed since your last application for reassessment. Include any information that will assist the district court judges in evaluating your ability to provide qualified representation for defendants in the category for which you wish to be considered. Please type or write your response legibly. Limit your response to the space provided below or to a maximum of one typed page.

**PART F**  
**JURAT**  
**(REQUIRED OF ALL APPLICANTS)**

\_\_\_\_\_  
Applicant's signature

SWORN TO and SUBSCRIBED before me on \_\_\_\_\_ (date).

\_\_\_\_\_  
Notary Public in and for  
The State of Texas

My commission expires: