

**APPLICATION FOR APPOINTMENTS
TO DEATH PENALTY APPEALS**

Name: _____

Date: _____

Business Address: _____

Birth Date: _____

Business Phone: _____

Home Phone: _____ Cell Phone: _____

FAX No. _____

E-mail address _____

Bar No. _____

Are you qualified to represent non-English speaking clients? Yes No

Which language(s)? _____

I wish to accept appointments on death penalty direct appeals.

I wish to accept appointments on death penalty writs of certiorari to United States Supreme Court.

I wish to accept appointments on death penalty direct appeals and writs of certiorari.

Article 26.052 of the Code of Criminal Procedure requires certain qualifications to accept appointments on death penalty cases, and the Local Selection Committee for the Fourth Administrative Judicial Region has adopted standards for the qualification of attorneys to be appointed to death penalty cases. Outlined below are the qualifications; please respond accordingly:

FIRST CHAIR APPOINTMENTS

Are you a member of the State Bar of Texas? Yes No Since what year? _____

Have you ever been found by a federal or state court to have rendered ineffective assistance of counsel during the trial or appeal of any capital case? Yes No

Have you had at least five years of criminal law experience? Yes No

The statute requires that to be qualified, an attorney must have authored "a significant number" of appellate briefs. The Criminal District Court Judges of Bexar County have determined a significant number to be eight felony briefs which must either be first degree felonies or 3g offenses, and the local selection committee concurs.

Have you authored at least **eight appellate briefs** where the defendant was convicted of a felony? Out of these eight, either one must be a capital murder, or 5 must be felonies of the first degree or a 3g offense. Yes No

List cases:

Cause No.	Defendant Name	County
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please provide proof if case is outside of Bexar County by judgment or court document and attach to this application.

Comments: _____

Do you have trial or appellate experience in the use of and challenges to mental health or forensic expert witnesses? Yes No

List case:

Cause No.	Defendant Name	County
_____	_____	_____

Please provide proof if case is outside of Bexar County by judgment or court document and attach to this application.

Comments: _____

Do you have trial or appellate experience in investigating and presenting mitigating evidence at the penalty phase of a death penalty trial? Yes No

List Case:

Cause No.	Defendant Name	County
_____	_____	_____

Please provide proof if case is outside of Bexar County by judgment or court document and attach to this application.

Comments: _____

Have you completed 5 hours in the past two years of CLE relating to appealing death penalty cases? Yes No

Have you successfully completed the minimum continuing legal education requirements of the State Bar of Texas? Yes No

Please attach as proof the CLE printout from the State Bar of Texas and complete the CLE Compliance Affidavit for Death Penalty Cases form.

I, _____, Attorney at Law, certify under penalty of law that the above information and facts are true and correct.

EXECUTED on the _____ day of _____, 20 ____.

Signature of Applicant

PLEASE EMAIL COMPLETED FORM TO:

lance.aldridge@bexar.org

**CRIMINAL DISTRICT COURT ADMINISTRATION
101 W. NUEVA, SUITE 301
SAN ANTONIO, TEXAS 78205**