Dallas County
Public Defender's Office

Confidential

INTERNSHIP PROGRAM APPLICATION
LAW STUDENT INTERN

PERSONAL INFORMATION

Name: _____
Address: _____
Phone: _____ Email: _____
Date of Birth: _____ Driver's License No. & State: _____
Last 4-Digit of Social Security No.: _____

SEMESTER TERM

Application Submission Date: _____
Semester for which I am applying:
☐ Fall 20_____ ☐ Spring 20_____ ☐ Summer 20_____
☐ Session 1 ☐ Session 2 ☐ Entire Summer

Type of Internship:
- ☐ Volunteer Intern
- ☐ Intern for Credit (You arrange credit through your school)
- ☐ Intern as part of grant or scholarship. Specify: _____
  - ☐ Does the internship require a project or research?
- ☐ Post-Graduate/Post-Bar Internship

LAW SCHOOL

Name of Law School: _____
At the start of the internship, which year of law school will you be in?
☐ 1L ☐ 2L ☐ 3L ☐ Post-Graduate (pending BAR results or pending employment)
Law School Sponsor or Internship Program Coordinator (if applicable):
Name_____
Email: _____

Projected Graduation Date: _____ Current GPA: _____
Undergraduate School: _____ Degree: _____ GPA: _____

ASSIGNMENT PLACEMENT

Please rank your preferred assignment from 1 to 9 (1 is most interested):

_____ Adult Criminal (Misdemeanor & Felony)
_____ Mental Health
_____ Capital
_____ Appellate
_____ Immigration Advisal
_____ Juvenile
_____ Family
_____ DNA Exonerations
_____ CPS
_____ No preference

**See descriptions of each division on our website.*

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QUESTIONS & ANSWERS

Have you ever been convicted of a criminal offense? If yes, please provide dates and locations.

_____

_____

_____

Why are you interested in the Dallas County Public Defender's Office?

_____

_____

_____

What do you hope to gain from this internship program?

_____

_____

_____

Which legal work or division are you most interested in, and why?

_____

_____

_____

Will you be required to complete a project or research during this internship? If yes, what topics interest you?

_____

_____

_____

Have you previously worked at a law firm or legal agency? If yes, what was your role and what contributions did you make?

_____

_____

_____

Are you proficient in languages other than English? _____ If so, which languages: _____

_____

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CERTIFICATION

I, _____, have read the Internship Program information in its entirety. I certify that the information I have given in this application and attachments is my own, and is true, correct, and complete to the best of my knowledge.

_____ _____

Signature Date

MANDATORY APPLICATION ATTACHMENTS

Please submit the following items to the Internship Coordinator:

Elizabeth Perry
Training Supervisor and Internship Coordinator
pdinternship@dallascounty.org
Phone number: 214-653-3550

1. Cover Letter
2. Resume
3. Unofficial Transcript
4. Headshot
5. Writing Sample
6. Three to five letters of recommendation or names of references with their contact information

No applications will be considered unless they are complete, include all attachments, and are sent to the email address above by the application deadline.