

Suffolk County District Attorney's Office



APPLICATION FOR THE POSITION OF ASSISTANT DISTRICT ATTORNEY

I. CONTACT INFORMATION

A. Personal Contact Information

Name:

Street Address:

City:

State:

Zip Code:

Personal Email Address:

Personal Telephone Number:

B. Work Contact Information

Name of Current Employer:

Street Address:

City:

State:

Zip Code:

Work Email Address:

Work Telephone Number:

II. APPLICATION HISTORY

Have you previously applied to be an Assistant District Attorney in Suffolk County? Yes No

If you answered yes, identify the month and year in which you applied and the result of the application:

Are you applying for an attorney position with any other District Attorney's Office or any other prosecutor's agency? Yes No

If you answered yes, please identify the office to which you have applied, the month/year of the application, and the current status of the application:

III. VETERAN AND PEACE CORPS STATUS

Have you served in the United States Armed Forces? Yes No

If so, please identify by branch and dates of service:

Have you served in the United States Peace Corps? Yes No

If so, please identify your assignment and dates of service:

IV. EDUCATION

A. Law School

Name of Law School Conferring Degree:

Degree: Graduation Date:

Class Standing (if available):

Significant Honor(s) (if any):

Significant Law School Activities (e.g., journal participation, clinical or other externship experience, membership in student or community organizations, etc.) (if any):

If you attended any other law school, please identify the law school, the dates of attendance, and degrees conferred, if any:

B. Undergraduate School

Name of Undergraduate School:

Degree: Graduation Date:

Significant Honor(s) and/or Activities (if any):

C. Other Post-Graduate Education

Name of Institution:

Degree: Graduation Date:

Significant Honor(s) and/or Activities (if any):

VI. EMPLOYMENT HISTORY AND REFERENCES

A. Current Employer

Name of Current Employer:

Your Title at Current Employer:

Dates of Employment:

Street Address:

City:

State:

Zip Code:

Name of Current Supervisor:

Tel. No.:

Email Address:

Do you authorize this Office to contact your current employer, including the supervisor you have listed above? Yes No Other (please explain):

B. Previous Employers

Beginning with the most recent employment prior to your current job, please include all employers you have had since you received your undergraduate degree. If you have had more than three employers since you received your undergraduate degree, please provide the information requested regarding these additional employees on separate sheet(s) of paper. (NB: Unless you inform us otherwise, we will assume that you authorize us to contact the employer(s) listed below):

1. Previous Employer (1)

Name of Previous Employer:

Your Title:

Dates of Employment:

Street Address:

City:

State:

Zip Code:

Supervisor's Name:

Tel. No.:

Email:

2. Previous Employer (2)

Name of Previous Employer:

Your Title:

Dates of Employment:

Street Address:

City:

State:

Zip Code:

Supervisor's Name:

Tel. No.:

Email:

3. Previous Employer (3)

Name of Previous Employer:

Your Title:

Dates of Employment:

Street Address:

City:

State:

Zip Code:

Supervisor's Name:

Tel. No.:

Email:

VII. References

Name of Reference:

Nature of Relationship:

Title:

Organization:

Telephone Number:

Email:

Name of Reference:

Nature of Relationship:

Title:

Organization:

Telephone Number:

Email:

Name of Reference:

Nature of Relationship:

Title:

Organization:

Telephone Number:

Email:

C. Commitments to Other Employers

Have you made any commitment to your current employer or any prospective employer to work for a specific time frame? Yes No

If you answered yes, please describe the nature of the commitment:

VIII. MISCELLANEOUS BACKGROUND INFORMATION

Are you a U.S. Citizen? Yes No

Have you ever been charged and/or convicted of a crime? Yes No

Since starting law school, have you engaged in the illegal use and/or supply of any drug or controlled substance? Yes No

Since starting law school, have you failed to file or pay Federal, state or other taxes when required by law or ordinance? Yes No

Have you ever been disciplined or sanctioned by a higher educational institution for plagiarism or other misconduct involving unethical or dishonest conduct?

If you answered yes to any of the questions in this section, please explain the circumstances below. If necessary, you may provide your explanation on a separate sheet of paper and attach it to this form. Please note that answering yes to any of these questions is *not* per se disqualifying.

IX. POTENTIAL CONFLICT OF INTEREST ISSUES

Identify any matter on which you have worked, including closed matters and/or matters on which you are currently working involving this Office and, provide the name of the ADA(s) assigned to it. If, during the course of the application process, you begin working on any other matter involving this Office, please advise us by letter with the requisite information.

X. CERTIFICATION

We will consider all of the information you have submitted as part of our evaluation of your application, and that information is subject to our further investigation and/or verification. It is therefore important that this information be accurate. Please read the following paragraph carefully and then sign this certification:

CERTIFICATION - I CERTIFY that all the statements made on this form and on any attachments to this form are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Signature:

Dated: