

**CJA INVESTIGATOR APPLICATION**

**GENERAL INFORMATION:**

1. FULL NAME:	2. SOCIAL SECURITY NUMBER:
3. PLACE OF BIRTH:	4. DATE OF BIRTH:
5. ADDRESS:	6. PHONE NUMBERS:  DAY: _____  NIGHT: _____  7. E-MAIL : _____

**INVESTIGATIVE EXPERIENCE:**

8. Are you currently employed as an investigator? (Please circle) Yes No  
If yes how long have you been employed as an investigator? \_\_\_\_\_
9. If you have previously worked as an investigator, please attach to this application the contact information for the last five attorneys for whom you completed an investigation.
10. Do you work full or part-time as an investigator? \_\_\_\_\_
11. What has been your primary casework? (Please circle) Felony Misdemeanor CCAN
12. Have you testified in court? (Please circle) Yes No  
If yes how many times? \_\_\_\_\_
13. Have you ever taken a verbatim written statement from a witness? (Circle) Yes No  
If yes how many times? \_\_\_\_\_
14. Have you ever been a defense investigator in any other jurisdiction? (Circle) Yes No  
If yes please list which jurisdictions. \_\_\_\_\_  
\_\_\_\_\_

**BACKGROUND INFORMATION:**

15. During the last 10 years, have you been convicted, been imprisoned, been on probation, or been on parole in the United States? (Includes felonies, firearms or explosives violations, misdemeanors and all other offenses). If yes, please attach an explanation.	<u>Yes</u>	<u>No</u>
16. Are you currently under investigation by any law enforcement agency, or do have any pending criminal cases in the United States? If yes, please attach an explanation to this application.	<u>Yes</u>	<u>No</u>
17. Have you ever retired from the Federal or District of Columbia governments on disability? If so, indicate which government and date of retirement.	<u>Yes</u>	<u>No</u>

ADDITIONAL INFORMATION:

Please attach the following to this application form:

18. A copy of valid drivers license, state identification card, or other proof of identity.
19. A Metropolitan Police Department (MPD) "Police Clearance". (A police clearance may be obtained from MPD at 300 Indiana Ave. NW, room 3055)
20. Three work related or academic references. Please include the reference's name, title, telephone number, agency/company name, address, and your relationship with each particular reference. Please indicate if you wish to be notified before your references are contacted.
21. Writing sample. The writing sample should be at least 250, and no more than 500, words in length. The writing sample will be evaluated along with the final exam, but should be included with this application. Please discuss what investigative steps you would plan to take in response to the following hypothetical case:

Your attorney's client is charged with robbery and assault with a dangerous weapon. These charges arose from a shooting which occurred at a liquor store on 8<sup>th</sup> and Pennsylvania, S.E., approximately one week ago. From your attorney you know that an ambulance was summoned to the scene and that the complaining witness was recently released from the hospital. The complaining witness' name is John Doe and your attorney believes he lives in Southeast Washington. The client is currently locked up at D.C. Jail.
22. A copy of your High School Diploma, or proof of a GED, or a statement that you are applying as an otherwise qualified candidate based on past work experience as an investigator.
23. A copy of Resume.

CERTIFICATION:

23. I certify that, to the best of my knowledge and belief, all of the information in this application, including the attached materials and any other materials that I have submitted for the position for which I am applying, is true, correct, complete, and made in good faith. I understand that a false or fraudulent answer to any question on any part of this declaration or its attachments, or any other papers submitted may be grounds for disqualification for certification. I understand that any information I give may be investigated for purposes for determining eligibility. I consent to the release of information about my ability and fitness pursuant to the *Guidelines For Investigators in the Superior Court for the District of Columbia*.

24. Applicant's Signature

Date

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\*\* Application must be received at least ONE MONTH prior to the next scheduled training date. Classes are limited to 30 attendees. Priority is given to completed applications in the order they are received. If the class is already full your application will be considered for the next scheduled class. Please submit application to: The Public Defender Service, Attn. Brendan Wells, 633 Indiana Ave., NW, Washington DC 20004