

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:

<b>Cause No.</b>	<b>Defendant Name</b>	<b>County</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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:

<b>Cause No.</b>	<b>Defendant Name</b>	<b>County</b>
_____	_____	_____

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:

<b>Cause No.</b>	<b>Defendant Name</b>	<b>County</b>
_____	_____	_____

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 \_\_\_\_\_, 2019.

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Signature of Applicant

**PLEASE RETURN COMPLETED FORM TO:**

**CRIMINAL DISTRICT COURTS ADMINISTRATION  
101 W. NUEVA, SUITE 301  
SAN ANTONIO, TEXAS 78205  
aamici@bexar.org**