



**OFFICE OF THE STATE'S ATTORNEY
COOK COUNTY, ILLINOIS**

KIMBERLY M. FOXX
STATE'S ATTORNEY

69 W. Washington, Suite 3200
Chicago, Illinois 60602

Employment Application

Licensed Attorney 3rd Year Law Student

Are you applying for a Secondment or Fellowship? Yes No

Answer all questions fully and carefully in ink. Some questions may be answered by circling the answer which applies to you. Attach additional sheets in order to give complete and detailed information. The Cook County State's Attorney's Office is an equal opportunity employer. It is the policy of The Cook County State's Attorney's Office that applicants for employment are recruited, selected, and hired on the basis of individual merit and ability, with respect to position to be filled and potential for promotions or transfers which may be expected to develop. Applicants are recruited, selected, and hired without discrimination because of race, color, creed, religion, ancestry, national origin, age, sex (including gender identity, sexual orientation and pregnancy), genetic information, citizenship, military service, marital status, parental status and disability. Furthermore, personnel procedures and practices with regard to training, transfer, compensation, demotion, layoff or termination are to be administered with due regard to job performance, experience and qualification, but without discrimination because of race, color, religion, sex, national origin, disability, sexual orientation, pregnancy, marital or veteran/military status. **PLEASE PRINT CLEARLY AND LEGIBLY**

Personal Information

DATE _____

Name _____
First Middle (Maiden Name) Last

Address _____

Phone _____
Daytime Evening

E-mail Address _____

Law School _____ Graduation Date _____

Have you previously applied, interviewed or worked in any capacity within the office? If yes, please provide details and attach a separate sheet if necessary.

Veterans Information

Are you or have you been an active member of the military service or the United States Reserve Units, National Guard, or an alternative service under the Selective Service Act?

Yes No

Branch of Service: _____

List your service dates:

Date of Entry: _____

Date of Discharge: _____

What was your military occupation classification? _____

Please attach a copy of your DD-214.

**** COMPLETE THIS SECTION IF YOU ARE A LICENSED ATTORNEY****

Date of Illinois License _____

ARDC # _____

Additional State/Federal Licenses and Dates

Have you represented a party or witness in any proceeding wherein this office is involved?
If yes, please provide details and attach a separate sheet if necessary.

**** ALL APPLICANTS MUST ANSWER THE FOLLOWING****

In which Bureau are you interested? Please rank your level of interest within each Bureau using 1-2, 1 being the highest:

Criminal Prosecutions _____

Civil Actions _____

****THE REMAINDER OF THE APPLICATION SHOULD BE COMPLETED BY ALL APPLICANTS****
Background checks of all applicants will be conducted prior to any interviews

Driver's License Information

Do you possess a valid driver's license? Yes No State _____

Driver's License Number _____ Expiration Date _____

Have you ever had your driving privileges suspended, revoked or canceled in any state? Yes No
If "Yes", list state and explain:

Was your license reinstated? Yes No
If yes, when was it reinstated? _____

Traffic Information

List all traffic convictions for traffic violations for the past 5 years and provide details.

Approximate Date	Conviction	Action Taken

Civil Litigation Information

List any and all civil cases in which you have been a named party. Please include case numbers and the disposition of the matter.

Criminal Information

Please note if you answer yes to any of the questions in the Criminal Information Portion, you must provide comprehensive details and attach a separate sheet if necessary. Failure to provide details may result in removal from consideration.

Have you ever been convicted of a crime or are you now under charges for any offense against the Law?

You may omit: (1) any charges that were dismissed or resulted in acquittal; (2) any conviction that has been set aside, vacated, annulled, expunged, or sealed; (3) any offense that was finally adjudicated in a juvenile court or juvenile delinquency proceeding; and (4) any charges that resulted only in a conviction of a noncriminal offense. All felony and misdemeanor convictions and all convictions in state and federal courts are criminal convictions and must be disclosed, including domestic violence offenses.

Yes No If yes, please provide further details below that include the arrest date and location, all crimes charged, any associated case numbers, any plea agreement or trial information, any resulting sentence and the disposition of the case.

Crime Charged

Police Agency

Date of Incident

Disposition of the Case

Have you ever been arrested or detained by the police? Yes No

Crime Charged

Police Agency

Date of Incident

Disposition of the case

Have you ever been the subject of a criminal investigation whether or not you were arrested? Yes No
If yes, please provide detailed information about the investigation below and attach any additional information necessary.

Education												
List the schools you have attended along with the other information required												
	Name and Address of school			Years Completed			Dates Attended			Graduation YES or NO		
Colleges or Universities												
Law/Graduate School												
List other formal and special training courses that may be relevant to this position												
List professional licenses or certificates you hold or have held												
List any foreign languages you speak and indicate your proficiency by placing an "X" in the appropriate space												
Language	Reading			Speaking			Understanding			Writing		
	Exc.	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair
Indicate special qualifications not covered by the above questions (i.e. patents owned, published author, honors and fellowships received, etc.)												

References			
List the names of three adults not related to you, who have known you for a period of at least 5 years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality, and other qualities.			
1. Name:	Address:	Home	Phone #:
Business Address:	Business Occupation:	Business Phone#:	
Years Known:			
2. Name:	Address:	Home	Phone#:
Business Address:	Business Occupation:	Business Phone#:	
Years Known:			
3. Name:	Address:	Home	Phone#:
Business Address:	Business Occupation:	Business Phone#:	
Years Known:			

Employment History							
List all jobs you have held for the last ten years, including periods of unemployment. Include military service, temporary and part-time work. Start with your most recent job. Attach a separate sheet if necessary.							
1.	Employer's Name		Address		Phone Number		Type of Business
	Name and Title of supervisor		Exact title of position		Monthly salary	Start Date	End Date
Explain what your duties were				Reason for leaving			
2.	Employer's Name		Address		Phone Number		Type of Business
	Name and Title of supervisor		Exact title of position		Monthly salary	Start Date	End Date
Explain what your duties were				Reason for leaving			

3.	Employer's Name	Address	Phone Number	Type of Business		
	Name and Title of supervisor	Exact title of position	Monthly salary	Start Date	End Date	
Explain what your duties were			Reason for leaving			
4.	Employer's Name	Address	Phone Number	Type of Business		
	Name and Title of supervisor	Exact title of position	Monthly salary	Start Date	End Date	
Explain what your duties were			Reason for leaving			

Please highlight any aspect of your education or experience which may be helpful in evaluating your application:

Why are you interested in employment with the Office of the Cook County State's Attorney?

The following information is optional and in no way affects your employment opportunities. This information complies with the U.S Equal Employment Opportunity Commission and will only be used for statistical purposes:

I identify with the following gender: Female Male Gender Nonconforming

Racial or Ethnic Groups I identify with (please check all that apply):

- African American or Black American Indian, Native American or Alaskan Native
- Arab or Middle Eastern Asian Hispanic or Latino/a/x
- Native Hawaiian or Other Pacific Islander White or Caucasian
- I prefer not to answer



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Fax: (312) 603-9689

Release Form

Please read the following carefully before signing it as it contains terms and conditions that affect your application and potential employment.

1. **VERIFICATION:** I verify that all information I have provided both orally and in documentary form in connection with my application for a position with the Cook County State's Attorney's Office is true and accurate. I understand that any false or misleading information I furnish in connection with my application for employment may cause my application to be rejected, any contingent offer of employment to be rescinded, or if already employed immediate termination, regardless of when discovered.
2. **AUTHORIZATION and RELEASE:** I authorize the Cook County State's Attorney's Office to conduct a complete and thorough investigation of my qualifications for employment including a background check. I release any and all persons and parties connected with any investigation from any and all claims or damages arising from the furnishing of information. I further understand that my offer of employment and actual employment is contingent upon satisfactory results of such investigations. I further agree to provide my date of birth and social security number for the sole purpose of conducting background checks.
3. **EMPLOYMENT-AT-WILL:** I understand and agree that my employment is terminable at will. Both the State's Attorney's Office and I remain free to end our work relationship at any time and for any reason. Further, I understand that nothing in any policies, manuals or similar documents creates an expressed or implied contract of employment.

PRINT NAME

SIGNATURE

DATE OF BIRTH

SOCIAL SECURITY NUMBER

DL NUMBER/ISSUING STATE

DATE



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Completed Application Checklist

- _____ Application
- _____ Signed Release Form
- _____ Official or /Un-Official Transcript
(Self-prepared transcripts will not be accepted. Attorneys with more than 5 years of experience do not need to provide transcripts.)
- _____ Resume
- _____ No More than 3 Letters of Recommendation
(If more than 3 are received, only the first 3 will be considered.)
- _____ Writing Sample
(Not to exceed ten pages.)
- _____ Cover Letter

Please note if any materials will be sent separately

Incomplete Applications will not be considered

Please return your completed application to:
Office of the Cook County State's Attorney
Attn: Legal Hiring
69 W. Washington, suite 3200
Chicago, Illinois 60602
Email: attyhire@cookcountyil.gov

THE OFFICE OF THE COOK COUNTY STATE'S ATTORNEY IS AN EQUAL OPPORTUNITY EMPLOYER