

Driver's License Information

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

Driver's License Number: _____ Expiration Date: _____

Do you have a vehicle? Yes No

Have you ever had your driving privileges suspended, revoked or canceled in any state?
Yes No

Please explain if you checked "yes."

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 |
|------------------|------------|--------------|
| | | |
| | | |
| | | |
| | | |
| | | |

Criminal Information

The following information is voluntary. Background checks will be completed on all applicants invited to interview. Please note if you choose to complete the criminal information portion and answer yes to any questions below, you must provide comprehensive details and attach a separate sheet if necessary. Failure to provide details may result in removal from consideration. Misrepresentation or omission of facts represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date.

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.

| | |
|---|-------------------------|
| Date of Incident | Police Agency |
| Crime/s Charged | Case number |
| <input type="checkbox"/> Trial <input type="checkbox"/> Plea <input type="checkbox"/> Dismissal | Disposition of the Case |
| | |
| | |
| | |

| | |
|---|-------------------------|
| Date of Incident | Police Agency |
| Crime/s Charged | Case number |
| <input type="checkbox"/> Trial <input type="checkbox"/> Plea <input type="checkbox"/> Dismissal | Disposition of the Case |
| | |
| | |
| | |

Education

Which school do you attend? _____

Current GPA: _____

| List the schools you have attended and provide additional required information. | | | | | | | | | | | | |
|--|----------------------------|-----------------|----------------|----------------------|------|------|---------------|------|------|---------|------|------|
| | Name and Address of school | Years Completed | Dates Attended | Graduation YES or NO | | | | | | | | |
| High School | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Colleges or Universities | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Law/Graduate School | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| List other formal and special training courses that may be relevant to this position. | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 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 computer skills or programs you may be proficient in. | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

| References | |
|--|----------|
| List the names of two adults not related to you, who have known you for a period of at least 2 years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality, and other qualities. | |
| 1. Name: | Phone #: |
| Relationship: | |
| 2. Name: | Phone#: |
| Relationship: | |

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

Sex: Female Male

Racial or Ethnic Classification:

- White Black or African American American Indian or Alaska Native Asian
- Native Hawaiian or Other Pacific Islander Hispanic or Latino
- Other: _____

List the days and hours you will be available to work between the hours of 8:00AM – 5:00PM.

| Day | Start | End |
|-----------|-------|-----|
| Monday | | |
| Tuesday | | |
| Wednesday | | |
| Thursday | | |
| Friday | | |
| Saturday* | | |
| Sunday* | | |

* Weekend bond court opportunities are available in the First Municipal (misdemeanor crimes) and Juvenile Delinquency divisions.

PLACEMENT IS BASED ON THE NEEDS OF THE OFFICE. For informational purposes only, please rank your preference for assignments below. Use 1-5, with one being your first choice. You should only rank a total of five choices from the entire list below and not five within each bureau.

Civil Actions Bureau (50 W. Washington unless indicated otherwise below.)

- Real Estate Taxation ____
- Medical Litigation ____
- Torts & Civil Rights ____
- Complex Litigation ____
- Labor and Employment ____
- Municipal Litigation ____
- Workers Compensation ____
- Child Support Enforcement (28 N. Clark Street) ____

Criminal Prosecutions Bureau (2650 S. California unless indicated otherwise below.)

- Criminal Appeals (50 W. Washington) ____
- Felony Trial Division ____
 - Sexual Assault & Domestic Violence (555 W. Harrison) ____
 - Narcotics Prosecutions Bureau ____
 - Alternative Prosecution and Sentencing ____
 - Special Prosecutions Bureau ____
 - Gang Crimes ____
 - Human Trafficking ____
 - Financial Crimes ____
 - Professional Standards ____
- Juvenile Justice Bureau (1100 S. Hamilton) ____
- Traffic (69 W. Washington) ____
- Consumer Fraud (69 W. Washington) ____
- Seniors & Persons w/ Disabilities (69 W. Washington) ____

Municipal District Courthouse Locations

- Bridgeview: 10220 S. 76th Ave. ____
- Markham: 16501 S. Kedzie Pkwy. ____
- Maywood: 1500 S. Maybrook Drive ____
- Rolling Meadows: 2121 Euclid Ave. ____
- Skokie: 5600 W. Old Orchard Rd. ____



OFFICE OF THE STATE'S ATTORNEY
COOK COUNTY, ILLINOIS

KIMBERLY M. FOXX
STATE'S ATTORNEY

69 W. Washington, Suite 3200
Chicago, IL 60602

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 security 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



OFFICE OF THE STATE'S ATTORNEY
COOK COUNTY, ILLINOIS

KIMBERLY M. FOXX
STATE'S ATTORNEY

69 W. Washington, Suite 3200
Chicago, Illinois 60602

Completed Application Checklist

_____ Application

_____ Signed Release Form

_____ Official or /Un-Official Transcript
(Self-prepared transcripts will not be accepted)

_____ Resume

_____ No more than (3) Letters of Recommendation
(If more than three are received, only the first three will be considered)

_____ Writing Sample (Not to exceed 5 pages)
(This does apply not for undergraduate or graduate students)

Please note if any materials will be sent separately.

Incomplete Applications will not be considered.

Please return your completed application via email to:
Sao.interns@cookcountyil.gov.

Any hard copy materials can be sent to:
Office of the Cook County State's Attorney
Attn: Clerkship/Internship Program
69 W. Washington, suite 3200
Chicago, Illinois 60602

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