OFFICE OF THE STATE ATTORNEY



FIFTEENTH JUDICIAL CIRCUIT IN AND FOR PALM BEACH COUNTY

ALEXCIA COX STATE ATTORNEY



HOW DO I APPLY FOR A LEGAL INTERNSHIP AT THE STATE ATTORNEY'S OFFICE IN PALM BEACH COUNTY?

- 1) Complete all pages in the application packet, including the Employment Application which is required of all employees, interns and volunteers. Please print legibly or type your responses.
- 2) Security & Background Authorization must be notarized prior to submission. Include clear color copies of requested identification documents.
- 3) Include Cover Letter & Resume
- 4) Completed applications can be submitted via U.S. Mail, email, faxed or hand delivered. Be sure to keep a copy for your files.
- 5) All applications will be acknowledged and we will begin processing completed applications to include the initial background screening.
- 6) We will schedule an interview to discuss your qualifications, interests and preferences.
- 7) Upon acceptance, you will be contacted to discuss availability and scheduling needs.
- 8) On your first day, you will receive an orientation and computer training.
- 9) If you have any questions about the programs or application process, please contact us!

humanresources@sa15.org

401 North Dixie Highway, West Palm Beach, Florida 33401 Phone: (561)355-7100 www.sa15.org

OFFICE OF THE STATE ATTORNEY



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LAW STUDENTS

Law students can apply for semester or summer internships at the State Attorney's Office.

Once accepted, Law Student Interns are assigned to specific trial court divisions focusing on trial litigation in criminal matters involving misdemeanor and felony offenses within Palm Beach County, Florida. Duties may include legal research, assisting in trial preparation, victim and witness contact, preparation of discovery, attending depositions and court proceedings, and discussing case management and trial strategy with Assistant State Attorneys.

With approval from the school, internships may be taken for credit.

All students will be interviewed as this allows the office to determine the students' interests and skill sets. Students may be placed in a division where there is a need for assistance. In addition, students will undergo a background check and fingerprinting prior to their internships.

PAID CERTIFIED LEGAL INTERNS

Law students who have been certified by the Florida Supreme Court can fully participate in criminal trials and other prosecution matters within Palm Beach County, Florida. In addition to the duties of a Law Student Intern, Certified Legal Interns are authorized to speak on the record in open court and will be responsible for a limited caseload in either the County Court Division or the Juvenile Division. Certified Legal Interns will gain valuable litigation skills and have the opportunity to interact with judges, defense counsel and law enforcement agencies.

This is an hourly paid position but does not include State Benefits. Students must undergo a background check and fingerprinting prior to their internships.

Prospective CLI's should contact the appropriate Dean of their Law School to determine eligibility to participate in a clinical program.

REQUIRED DOCUMENTS

Resume
Cover letter addressed to Human Resources
State of Florida Application
Security and Background Form – Notarized
Information Sheet
Proper Identification must be provided – clear color copies of ID Documents

INFORMATION SHEET for

□ Certified Legal Intern or □ Law Student Intern

Please print legibly

Name:	Full Address:
SSN:	Date of Birth:
3314.	Date of Birtii.
Cell Phone/Home Phone:	Email Address:
Emergency contact:	Emergency Contact best phone number:
Emergency Contact Relationship:	Emergency Contact Alternate Phone number:
Start Date:	Division Assigned:
Supervisor:	Location:
Driver's License copy	Social Security Card copy
Driver's License copy	Social Security Card Copy



Office of the State Attorney-15th Judicial Circuit -State Attorney Alexcia Cox <u>SECURITY AND BACKGROUND QUESTIONNAIRE</u>



PLEASE PRINT

	Purpose of Background: ☐ SAO Emp	loyee SAO Volunteer	☐ SAO Vendor
Name:			
Firs			Last
Aliases:		Social Security#_	- -
Name on Bar	Application:		
Date of Birth	::/P	lace of Birth:	
		State	Country
Country of Ci	itizenship:		
Gender: □ N Race:	Male □ Female □ Unknown		
	A – Chinese, Japanese, Filipino, Korean, P other Pacific Islander	olynesian, Indian, Indonesia	an, Asian Indian, Samoan or any
	B – Person having origins in any of the bla	ack racial groups of Africa	
	I – American Indian, Eskimo or Alaskan na states of the United States of America	ative or a person having ori	gins in any of the 48 contiguous
	U – of indeterminable race		
	W – Caucasian, Mexican, Puerto Rican, Co	uban, Central or South Ame	rican or other Spanish culture or
F41:-: (61-	origin regardless of race		
Ethnicity: (Cr	neck only one) — Hispanic or Latino - OR -	☐ Not Hispanic	or Latino
Eye Color:	Hair Color:	Height:	Weight:
Current Stree	et Address:		
Previous Stre	eet Address:		
City:		State:	Zip:
Cell Phone: (Home Phone: (_)
Email addres	ss:		
	To Process This Application-Pro	per Identification Must Be	<u>Provided</u>
	Copy of Photo ID such as	Driver License OR Sta	ate ID
		AND	
□ Copy of O	Original Social Security Card <u>OR</u> D Copy of	Birth Certificate OR OT OT	:her <u>:</u> ************************************
	<u>Office</u>	<mark>e Use Only</mark>	
Background Cl	heck: Cleared:	Decli	ned:
Signed:			Date://
	nvestigator or Deputy Chief Investigator		



Signature of Notary

Office of the State Attorney Alexcia Cox 15th Judicial Circuit



To: **Concerned Person or authorized Representative** of any Organization of Repository of Records APPLICANT'S NAME: DATE OF BIRTH: _____ SOCIAL SECURITY NUMBER _____ I respectfully request and authorize you to furnish the Office of the State Attorney, 15th Judicial circuit, any and all information that you may have concerning my work record, school record, military record, reputation and financial and credit status. This information is to be used to assist the Office of the State attorney in determining my qualifications and fitness for the position I am seeking with the Office of the State Attorney, 15th Judicial Circuit. I hereby release you, your organization or others from any liability or damage which may result from furnishing the information requested. I hereby acknowledge that I have read this Personal Inquiry Waiver form, full understand its purpose and give my consent for the release of the describe records and information freely and voluntarily. SIGNATURE: STATE OF FLORIDA **COUNTY OF PALM BEACH** The foregoing instrument was acknowledged before me via □ physical presence OR □ online notarizations this _____, 20_____, 20_____ by the abovenamed applicant:_____ who is □ personally known to me or □ who has exhibited to me a reliable form of identification issued within the past five (5) years, to-wit: ______ (exact type of identification relied upon). An oath was not taken.

Stamp / Seal



State of Florida - State Attorney's Office, 15th Cir.

EMPLOYMENT APPLICATION

Equal Opportunity Employer/Affirmative Action Employer
The State of Florida does not tolerate violence in the workplace.

Where to Find Vacancy Information:

- \bullet O $\,$ n the Internet: https://peoplefirst.myflorida.com $\,$
- O ne Stop Career Centers Consult your local telephone directory or visit http://www.employflorida.com
- St ate Agency Personnel Offices

FOR OFFICIAL USE ONLY			
	/ /		
Ag ency Authorized Signature D	ate	Broadband/Class Code	Status
POSITION APPLIED FOR			
Agency:			
Title:			
Position Number:			
Counties of Interest:			
Minimum Acceptable Salary:			

ENERAL INSTRUCTIONS FOR COMPLETION OF APPLICATION:	HOW DO WE CONTACT YO	OU?		
C omplete all information within this application in its entirety. T ype or print in ink. Al I information provided will be a public record and will be released upon	Name (FIRSt) People First Employee ID Number	(Middle)	(Last)	
request, unless exempt or confidential. Sp ecify the position for which you are applying. (Note: A separate application must be submitted for each vacancy. Photocopies are acceptable.)	Mailing Address	(ii aiiy)		
ассеркаше.)	City	County	State	Zip Code
Si gn your name in the Certification Section (page 4). All information you submit is subject to verification.	Phone	Alternate Phone		
Subject to verification.	E-mail Address			

EDUCATION

HIGH SCHOOL:							
NAME / LOCATION OF SCHOOL	RECEIVED:	Diploma		other (spec	ify)		None
YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL:							
COLLEGE, UNIVERSITY OR PROFESSIONAL SCHOO	L: (TRANSCRIPTS MAY BE REQUIR	ED)					
N AME OF SCHOOL	LOCATION		ES OF IDANCE H / YEAR) T O Q	C RI H O EA F TR	URS C	OR / MINOR T OURSE OF D UDY E	YPE OF EGREE ARNED

YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL:

JOB-RELATED TRAINING OR COURS	SE WORK: (VOCATIONAL, TRADE, GOVERNMENTAL, BU	SINESS, ARM	IED FORCES,	ETC.)				
NAME OF SCHOOL	LOCATION	DATES OF ATTENDANCE (MONTH / YEAR)		CREDIT HOURS EARNED		COURSE OF STUDY	TRAINING COMPLETED	
		FROM	TO	CLASS	CLOCK		YESN	0
1			1					

YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL: _

LICENSURE, REGISTRATION, CERTIFICATION (EXAMPLES: Teacher Certification, RN, LPN, PE, CPA, etc.)

LICENSE, REGISTRATION OR CERTIFICATION:	Number	Date Received	Expiration Date	State Licensing Agency

PERIODS OF EMPLOYMENT

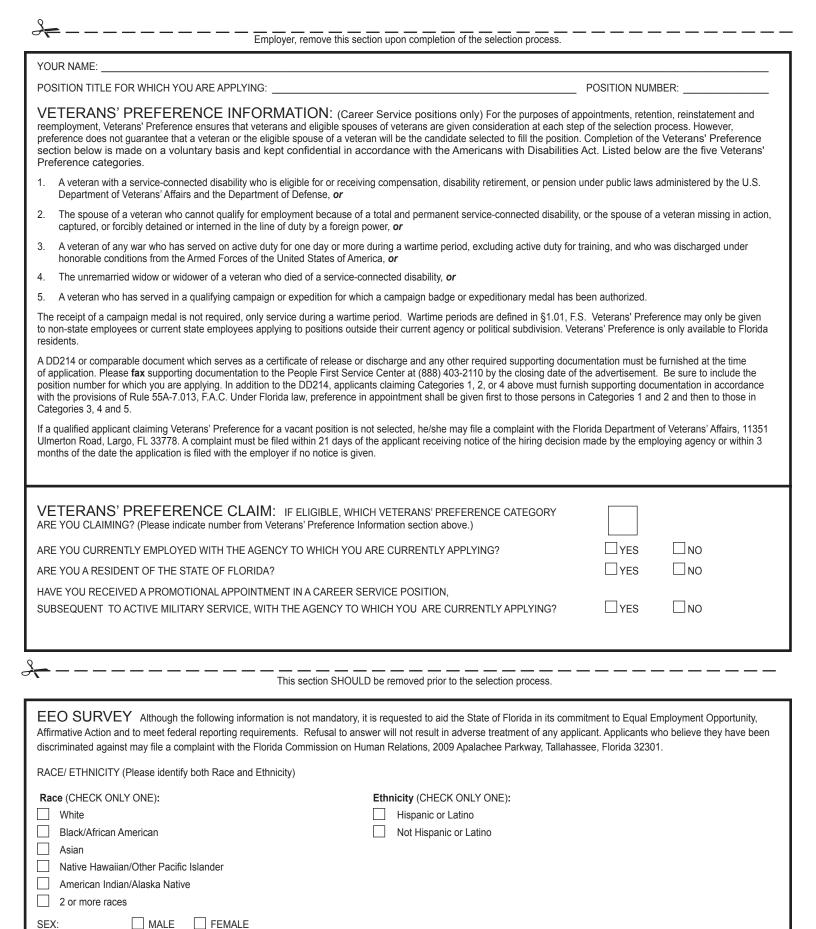
Describe all work experience in detail, beginning with your current or most recent job. Include military service (indicate rank), internships and job-related volunteer work, if applicable. Indicate number of employees supervised. Use a separate block to describe each position or gap in employment. If needed, attach additional sheets, using the same format as on the application. All information in this section must be completed. Resumes may be attached to provide additional information.

1 Name of Present or Last Employer:		
Address:	Your Job Title:	
Supervisor's Name:	Phone No.: ()	
FROM: TO: MONTH DAY YEAR TO: Duties and Responsibilities:		YOUR NAME IF DIFFERENT DURING EMPLOYMENT
Reason For Leaving:		
Name of Next Previous Employer:		
Address:	Your Job Title:	
Supervisor's Name:		
FROM:/ TO:/		YOUR NAME IF DIFFERENT DURING EMPLOYMENT
Reason For Leaving:		
3 Name of Next Previous Employer:		
Address:		
Supervisor's Name:		
FROM:/)
MONTH DAY YEAR MONTH DAY YEAR Duties and Responsibilities:		YOUR NAME IF DIFFERENT DURING EMPLOYMENT
		· · · · · · · · · · · · · · · · · · ·
Reason For Leaving:		

Name of Next Previous Employer:			
Address:		Your Job Title:	
Supervisor's Name:		Phone No.: ()	
	TO:	HOURS PER WEEK: (YOUR NAME IF DIFFERENT DURING EMPLOYMENT
Reason For Leaving:			
Name of Next Previous Employer:			
	TO://	HOURS PER WEEK: (YOUR NAME IF DIFFERENT DURING EMPLOYMENT
Reason For Leaving:			
Name of Next Previous Employer:			
Supervisor's Name:		Phone No.: ()	
		HOURS PER WEEK: (
Duties and Responsibilities:			
Reason For Leaving:			
rtodoon r or Loaving.			

If needed, attach additional sheets, using the same format as on the application. Resumes may be attached to provide additional information.

KNOWLEDGE / SKILLS / ABILITIES (KSAs)				
List KSAs you possess and believe relevant to the position you seek, such as operating heavy equipment of the position of the	ent, computer skills, fluency	in language(s),	etc.	
EXEMPTION FROM PUBLIC RECORDS DISCLOSURE ARE YOU A CURRENT OR FORMER LAW ENFORCEMENT OFFICER, OTHER COVERED EMPLOY OR THE SPOUSE OR CHILD OF ONE, WHOSE INFORMATION IS EXEMPT FROM PUBLIC RECORD DISCLOSURE UNDER SECTION 119.071(4)(d), FLORIDA STATUTES (F.S.)?		☐ YES	□NO	
**Other covered jobs include but are not limited to: correctional and correctional probation officers, firef sistant and statewide prosecutors, personnel of the Department of Revenue or local governments who support enforcement, and certain investigators in the Department of Children and Families [see§ 119.0]	se responsibilities include re			
BACKGROUND INFORMATION				
HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A FIRST DEGREE MISDEMEANOR?		YES	NO	
If "YES", what charges?				
Where convicted?	Date of Conviction:			
HAVE YOU EVER PLED NOLO CONTENDERE OR PLED GUILTY TO A CRIME WHICH IS A FELONY OR A FIRST DEGREE MISDEMEANOR?		YES	□NO	
If "YES", what charges?				
Where?	Date:			
HAVE YOU EVER HAD THE ADJUDICATION OF GUILT WITHHELD FOR A CRIME WHICH IS A FELONY OR A FIRST DEGREE MISDEMEANOR? If "YES", what charges?		YES	□NO	
Where?				
NOTE: A "YES" answer to these questions will not automatically bar you from employment. The nature the position for which you are applying are considered [see §112.011, F.S.]	job-relatedness, severity ar	nd date of the off	ense in relatio	n to
CITIZENSHIP				
The state of Florida hires only U.S. citizens and lawfully authorized alien workers. You will be required authorization to work in the U.S. $\frac{1}{2}$	to provide identification and	either proof of c	itizenship or pı	roof of
1. ARE YOU A U.S. CITIZEN?		YES	NO	
2. IF NO, ARE YOU LEGALLY AUTHORIZED TO ACCEPT EMPLOYMENT WITH THE SPECIFIC HIR AUTHORITY TO WHICH YOU ARE APPLYING?	ING	□YES	□NO	
RELATIVES				
TO YOUR KNOWLEDGE, DO YOU HAVE ANY RELATIVES WORKING IN THIS AGENCY?		□YES	□NO	
TO TOUR KNOWLEDGE, DO TOUTIAVE ANT RELATIVES WORKING IN THIS AGENCT!			Пио	
SELECTIVE SERVICE SYSTEM REGISTRATION				
Section 110.1128, Florida Statutes, prohibits the employment of any person who was required to regist Service Act, but failed to do so. Additionally, if currently employed by the State, this law prohibits the preseparated from the State.				
IF YOU ARE A MALE BORN ON OR AFTER JANUARY 1,1960, HAVE YOU REGISTERED OR DO YOU PROOF OF AN EXEMPTION FROM THIS REQUIREMENT (DOCUMENTATION MAY BE REQUIRED		YES	□NO	□ N/A
CERTIFICATION				
I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqual grounds for termination at a later date. I understand that any information I give may be investigated as my ability, employment history, and fitness for employment by employers, schools, law enforcement ag personnel staff, and other authorized employees of Florida state government for employment purposes employment if I am hired. I understand that applications submitted for state employment are public receives statements contained herein and on any attachments are true, correct, complete, and made in good	allowed by law. I consent to encies, and other individuals . This consent shall continuords. I certify that to the best	the release of in and organization to be effective	formation about to investigated during my	ut ators,
SIGNATURE:	DATE:			
				_



DATE OF BIRTH:

POSITION NUMBER:

POSITION TITLE FOR WHICH YOU ARE APPLYING:

Employment with the State of Florida

Note: This hard copy of the State of Florida employment application is to be used only if you are unable to use the online application process at https://jobs.myflorida.com/index.html

State Government Personnel Structure

Florida state government is a major employer in Florida offering many challenging and rewarding career opportunities. Included among the many advantages of working for the State are the diverse and interesting job opportunities as well as competitive salaries, benefits, and career mobility.

Employees with the State of Florida fall into a variety of different and autonomous personnel systems each with their own set of rules and regulations, collective bargaining agreements, and wage and benefit packages. The State Personnel System, comprised of employees in the Career Service, Selected Exempt Service and Senior Management Service pay plans, is the largest of these systems and is the focus of this narrative. The State of Florida employment application is used to apply for vacancies within the State Personnel System.

Most state jobs are in the Career Service pay plan. The Career Service provides uniform pay, job classification, benefits and recruitment for the majority of non-managerial jobs within state agencies. The Senior Management Service (SMS) includes upper management and policy-making jobs. Middle management, such as bureau chiefs, professional jobs, such as physicians and attorneys, and supervisory jobs are included in the Selected Exempt Service. Employees can move between agencies without any loss of state benefits.

Temporary jobs are funded by Other Personal Services (OPS) appropriations. OPS employees receive an hourly wage but no benefits such as insurance, leave, or retirement.

Non-State Personnel System
agencies are agencies
in which jobs do not fall
under the Career Service,
Selected Exempt Service
or Senior Management
Service pay plans
and their employment
procedures may differ.

These employers may or may not accept the State of Florida employment application. Additionally, their job titles and salaries may not be comparable to those in the State Personnel System.

How to Search for Vacancies

Individual state agencies are responsible for announcing their job vacancies and making hiring decisions. Generally, agencies accept job applications for advertised vacancies only. However, agencies may accept applications for certain positions on a continuous basis. A completed State of Florida employment application is required for each job vacancy to which you apply.

There are several ways for you to obtain state job vacancy information:

- Access the People First job information web site on the Internet at: https://jobs.myflorida.com
- C ontact individual State Personnel System agencies directly for information regarding their employment opportunities.
- C ontact a Florida One Stop Career Center for job information on and other employment opportunities. To locate the office nearest you, check your telephone directory under "Workforce One Stop Career Center" or visit: http://www.employflorida.com

How to Market Yourself

Prior to completing an application for any job, gather specific information about the duties of the job and relevant knowledge, skills and abilities required by carefully reviewing the job vacancy announcement or by contacting the employing agency, if necessary.

Use this information to ensure your application, cover letter, resume and other supporting materials address how your experience and education fulfill these requirements.

How Candidates are Selected

The first step an employing agency takes in the selection process is to review the applications which have been received to determine who is eligible to compete further in the selection process. Job-related criteria are used to determine those applicants who will be asked to participate in additional assessment steps such as an oral interview, a work sample exercise, or a proficiency test. The job-related information gained during the selection process will assist the hiring official in making the final selection decision. Veterans' preference and Affirmative Action goals are also considered by the agency in the decision-making process.

If, because of a disability, you require a special accommodation to participate in the application and selection process, please notify the hiring authority in advance.

