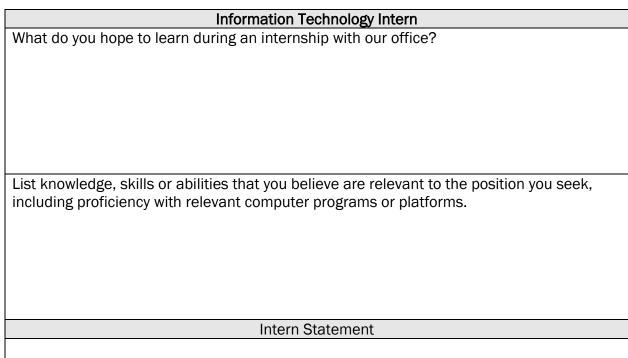


# Internship Application Office of the State Attorney, 13th Judicial Circuit

	GENERAL INFORMATION	DN		
Last Name:				
First Name:	Mido	lle:		
Address:				
City:	State:	Zip:		
Phone:	Email:			
Which academic term and year	are you applying for?	Year:		
Which type of internship are you	applying for?			
Are you eligible to receive acade	emic credit for this interi	nship?		
Do you intend to have outside employment or participate in any other internships while				
completing this internship?				
If yes, where?				
Number of hours per week you a	are available (min. 16 h	ours):		
If you are requesting placement	in a specific area or div	ision, please list here:		
How did you learn about this into	ernship?			
	ACADEMIC INFORMATION	NC		
Current school:				
City:	State:			
Major/Area of Study:		Date of enrollment		
Type of degree pursued:		Anticipated graduation		
· · · · · · · · · · · · · · · · · · ·	versities from which you	ı have received a degree: (attach		
additional sheets if needed)				
College/University:				
City:	State:			
Major/Area of Study:		Date of enrollment		
Type of degree earned:		Graduation		
College/University:				
City:	State:			
Major/Area of Study:		Date of enrollment		
Type of degree earned:		Graduation		
College/University:				
City:	State:			
Major/Area of Study:		Date of enrollment		
Type of degree earned:		Graduation		

Please complete only the section related to the internship for which you are applying.		
Certified Legal Intern (CLI) or Legal Intern		
Why are you interested in completing a prosecution clinic or legal internship with our office?		
Undergraduate Internship- Legal Track		
What are hoping to learn or take from an internship with our office?		
Communications Intern		
The field of Communications is very broad and encompasses many different skills and activities. Which aspects of Communications are you most interested in?		
Please list any computer programs or platforms relevant to the field of Communications that you are proficient in.		



By means of acknowledgement and signing of this form, I hereby understand and acknowledge that serving as an intern for the Office of the State Attorney, 13<sup>th</sup> Judicial Circuit, I will not be compensated by or eligible for any benefits, with the exception of Worker's Compensation benefits, with the State of Florida or with the Office of the State Attorney, 13<sup>th</sup> Judicial Circuit for any work performed by me on a voluntary unpaid basis. I understand that the Office of the State Attorney. 13<sup>th</sup> Judicial Circuit does not have dedicated parking facilities and that I am responsible for securing and paying for parking for myself. I agree that I will abide by the policies and procedures regarding internships established by my school and the Office of the State Attorney, 13<sup>th</sup> Judicial Circuit.

By marking this box, I acknowledge that I have read and understand this statement.

Background Screening Authorization

By means of acknowledgement and signing of this form, I hereby authorize the Office of the State Attorney, 13<sup>th</sup> Judicial Circuit, to process a set of my fingerprints for the purpose of accessing and reviewing Florida and national criminal history records that may pertain to me to determine eligibility for employment or licensure. If accepted as an intern, I will receive instructions for providing fingerprints. Fingerprinting should be completed at least one week prior to starting. I understand and acknowledge the following:

As a prospective intern, I am required to undergo a criminal background investigation and that the background investigation may include FCIC/NCIC and a driving history.

My fingerprints will be retained at the Florida Department of Law Enforcement (FDLE) and the Federal Bureau of Investigation (FBI) for the purpose of providing notice of any subsequent modifications to my criminal history record.

If I have any pending warrants, misdemeanor or felony charges, or any misdemeanor convictions occurring within three years of application, or any felony convictions in my lifetime, I will not be eligible to access CJIS, which is a necessary job function, and I will not be considered for internship or employment. Any other prior charges will be considered on a case-by-case basis.

The State Attorney's Office, Thirteenth Judicial Circuit's policy prohibits the sharing of criminal history information with non-criminal justice agencies or general public. Therefore, a copy of any criminal history record that may pertain to me can be obtained by selecting the "Request a Criminal History" link from the front page of the FDLE website www.fdle.state.fl.us, by email at publicrecords@fdle.state.fl.us, or by phone at (850) 410-7676.

I am entitled to challenge the accuracy and completeness of any information contained in any such criminal history record pursuant to §943.056, F.S., and Title 28, CFR, §16.30-34.

I am entitled, within a reasonable amount of time, to a determination as to the validity of my challenge before a final decision is made regarding my status as an employee, intern, volunteer, contractor, or subcontractor, if it is the sole factor precluding my employment or unescorted access to the secure facility.

By marking this box, I acknowledge that I have read and understand this statement.

Information for Background Screening		
Former Names (including i	naiden names):	
Race:	Gender:	
DOB:	Social Security #:	

Driver's license # & issuing state:

#### Additional Background Information

The State of Florida hires only U.S. Citizens and lawfully authorized alien workers. You will be required to provide identification and either proof of citizenship or proof of authorization to work in the U.S.

Are you a U.S. Citizen or legally authorized to work in the U.S.?

The Office of the State Attorney is a criminal justice agency within the definition of Florida Statute §943.045. Interns must report adult criminal history information regardless of whether such records have been sealed or expunged.

Have you ever been convicted of a felony or a first-degree misdemeanor? If yes, list charge, location, and date of plea:

Have you ever pled nolo contendere or pled guilty to a crime which is a felony or a first-degree misdemeanor?

If yes, list charge, location, and date of conviction:

Have you ever had adjudication of guilt withheld for a crime which is a felony or a first-degree misdemeanor?

If yes, list charge, location, and date of withhold of adjudication:

If you have additional matters to disclose, attach additional sheets and provide the requested information as to each offense.

NOTE: A "YES" answer to these questions will not automatically bar you from an internship opportunity. The nature, job-relatedness, severity and date of the offense in relation to the position for which you are applying are considered see §112.011, F.S.]

## Exemption from Public Records Disclosure

Are you a current or former law enforcement officer, other covered employee,\* or the spouse or child of one, whose information is exempt from public records disclosure under §119.071(4)(d), F.S.?

\*Other covered jobs include but are not limited to correctional and correctional probation officers, firefighters, certain judges, assistant state attorneys, state attorneys, assistant and statewide prosecutors, personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support enforcement, and certain investigators in the Department of Children and Families see §119.071, F.S.].

### Selective Service System Registration

§110. 1128, F.S., prohibits employment by the State including re-hire after a break in service) of any male born after October 1, 1962, who failed to register with the Selective Service System, under the provisions of the U.S. Military Selective Service Act, during the person's period of eligibility ages 18 through 25). Additionally, if currently employed by the State, this law prohibits the promotion of such person.

If you are a male born after October 1, 1962, have you registered with the selective service or do you have proof of an exemption from this requirement - documentation may be required?

#### Relatives

To your knowledge, do you have any relatives working in this agency?

#### Certification

I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqualify me for consideration in the program and, if I am accepted, may be grounds for release from the program at a later date. I understand that any information I give may be investigated as allowed by law. I consent to the release of information about my ability, employment history, and fitness for employment by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, personnel staff, and other authorized employees of Florida state government for purposes related to internship opportunities within the Office of the State Attorney, 13<sup>th</sup> Judicial Circuit. This consent shall continue to be effective during my internship. I understand that applications submitted for state employment or internships are public records. I certify that to the best of my knowledge and belief all of the statements contained herein and on any attachments are true, correct, complete, and made in good faith.

I acknowledge all of the above terms.

Signature:
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Email completed application to employment@sao13th.com