

# UNITED STATES ATTORNEY'S OFFICE FOR THE CENTRAL DISTRICT OF CALIFORNIA APPLICATION CHECKLIST

1. ASSISTANT UNITED STATES ATTORNEY APPLICATION \_\_\_\_\_

2. PERSONAL RESUME \_\_\_\_\_

3. LAW SCHOOL TRANSCRIPT

a. UNOFFICIAL \_\_\_\_\_

b. OFFICIAL \_\_\_\_\_

4. ONE WRITING SAMPLE \_\_\_\_\_

NOTE: The writing sample should be your individual work product and preferably ten pages or less. However, if you are submitting briefs, memoranda, etc. in which other lawyers contributed to the work products, we ask that you identify the argument, point, etc. which you specifically researched and wrote.

5. RACE AND NATIONAL ORIGIN IDENTIFICATION \_\_\_\_\_

6. ACTIVE MILITARY OR VETERAN \_\_\_\_\_

7. ALL DIVISIONS/BRANCHES APPLYING TO: Civil, Criminal/NSD (Los Angeles, Santa Ana, Or Riverside branches), Asset Forfeiture, Tax, Appeals [check all that apply (ctrl + select)]

**PLEASE BE ADVISED THAT BEFORE WE BEGIN TO PROCESS YOUR APPLICATION,  
ITEMS ONE THROUGH SEVEN MUST BE RECEIVED BY THIS OFFICE.**



12/18

**U.S. Department of Justice**  
*United States Attorney*  
**Central District of California**  
312 North Spring Street, Los Angeles, California 90012

**APPLICATION FOR EMPLOYMENT AS AN  
ASSISTANT UNITED STATES ATTORNEY  
CENTRAL DISTRICT OF CALIFORNIA**

**Date:** \_\_\_\_\_

**I. PERSONAL INFORMATION**

1. **Last Name:** \_\_\_\_\_ 2. **First Name:** \_\_\_\_\_ 3. **Sex:** \_\_\_\_\_

4. **U.S. Citizen:** \_\_\_\_\_ 5. **Employer:** \_\_\_\_\_ 6. **Telephone:** \_\_\_\_\_

7 **Address:** \_\_\_\_\_

8. **City, State, Zip:** \_\_\_\_\_

9. **Work Email Address** \_\_\_\_\_

10. **Home Address:** \_\_\_\_\_ 11. **Home Telephone:** \_\_\_\_\_

12. **Cellular:** \_\_\_\_\_

13. **City, State, Zip:** \_\_\_\_\_

14. **Home Email Address** \_\_\_\_\_

**NOTE:** 28 USC 545 requires that each Assistant United States Attorney shall reside in the district for which he or she is appointed or within 25 miles thereof.

15. **Month/Year of any prior application for appointment in CDCA:** \_\_\_\_\_

**II. EDUCATION INFORMATION**

16. Law School: \_\_\_\_\_ 17. Grad. Date: \_\_\_\_\_

*MO/YR*

18. Approximate 3 Year Average: \_\_\_\_\_ 19. Class Standing: \_\_\_\_\_

20. Significant Activities and Awards:

  
  

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**NOTE: YOU MUST REQUEST YOUR LAW SCHOOL TO PROMPTLY FORWARD AN OFFICIAL TRANSCRIPT OF YOUR GRADES TO THIS OFFICE.**

21. College: \_\_\_\_\_ 22. Major: \_\_\_\_\_ 23. Degree: \_\_\_\_\_

24. Grad. Date: \_\_\_\_\_ 25. GPA: \_\_\_\_\_ 26. Class Standing: \_\_\_\_\_

*MO/YR*

27. Significant Activities and Awards:

  
  

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**ADDITIONAL GRADUATE EDUCATION**

28. School: \_\_\_\_\_

29. Grad. Date: \_\_\_\_\_  
MO/YR

30. Degree and Subject of Study: \_\_\_\_\_

31. Significant Activities and Awards: \_\_\_\_\_

**III. LEGAL BACKGROUND**

32. Admitted to Practice Law in: \_\_\_\_\_ on \_\_\_\_\_  
STATE MO/YR

\_\_\_\_\_ on \_\_\_\_\_  
STATE MO/YR

33. Prior to your admission to the state bar, did you ever fail to pass a state bar examination? \_\_\_\_\_

If you answered yes, please identify the state bar jurisdiction and date. \_\_\_\_\_

34. Have you ever been denied admission to any state bar jurisdiction or have you ever been suspended, censured, or had your state bar license revoked by any state bar or current jurisdiction? \_\_\_\_\_

If you answered yes, please explain in full detail, all the facts and circumstances involved.

***NOTE: YOU ARE REQUIRED TO SUBMIT WITH YOUR APPLICATION A CERTIFICATE OF GOOD STANDING OR DOCUMENTARY PROOF FROM THE APPROPRIATE STATE AGENCY STATING THAT YOU ARE CURRENTLY AN ACTIVE, PAID AND REGISTERED MEMBER OF A STATE BAR.***

***IV. PAST JUDICIAL CLERKSHIPS, EMPLOYERS, AND REFERENCES***

***JUDICIAL CLERKSHIP:***

<b><i>DATES</i></b>	<b><i>JUDGE</i></b>	<b><i>COURT</i></b>
<b><i>Fr: MM/YR</i></b> _____  <b><i>To: MM/YR</i></b> _____		
<b><i>Fr: MM/YR</i></b> _____  <b><i>To: MM/YR</i></b> _____		

***EMPLOYERS:***

<b><i>DATES</i></b>	<b><i>FIRM and ADDRESS</i></b>	<b><i>SUPERVISOR and TELEPHONE</i></b>
<b><i>Fr: MM/YR</i></b> _____  <b><i>To: MM/YR</i></b> _____		
<b><i>Fr: MM/YR</i></b> _____  <b><i>To: MM/YR</i></b> _____		

<i>Fr: MM/YR</i> <hr/> <i>To: MM/YR</i> <hr/>		
<i>Fr: MM/YR</i> <hr/> <i>To: MM/YR</i> <hr/>		

**REFERENCES:**

<i>NAMES/OCCUPATION</i>	<i>ADDRESS</i>	<i>TELEPHONE</i>

**35. Please identify any person(s) currently working in the U.S. Attorney's Office, CDCA whom you know and state the nature of the relationship.**

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**36. Do you authorize this Office to contact your current employer? \_\_\_\_\_**

**37. Do you authorize this Office to contact your references? \_\_\_\_\_**

**38. Identify any matter which you have worked on and/or are currently working on involving this Office, and, provide the name of the AUSA assigned to it. If, during the course of the application process, you begin working on any other matter involving this Office, please advise us by written letter with the requisite information.**

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**You have been asked in the foregoing if you are working on a case involving this Office and to list the name of the case and the Assistant United States Attorney working on the case. Please do not list or request those Assistant United States Attorneys to serve as references.**

**NOTE: If you are currently working on a criminal or civil case involving this Office, please be aware that, in the event you receive and accept an offer of employment as an Assistant United States Attorney in the Central District of California, you will be required to terminate your representation of your client in that existing case.**

**V. CERTIFICATION**

**NOTE TO APPLICANT:** *Please read the following paragraph carefully and then sign this statement:*

*A false answer to any of the written questions may be grounds for terminating your employment or denying you employment in a Department of Justice (DOJ) sensitive position, and may be punishable by fine or imprisonment. All the information you have submitted will be considered in reviewing your responses and is subject to investigation (Title 18 U.S.C. § 1001).*

***CERTIFICATION - I CERTIFY that all the statements made on this eight-page form and on any attachments to this form are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. No promises or threats have been made to me, and no pressure or coercion of any kind has been applied against me by any employee of the United States Government.***

\_\_\_\_\_ **DATE** \_\_\_\_\_



# **RACE AND NATIONAL ORIGIN IDENTIFICATION**

*(Please read the instructions and Privacy Act Statement before completing form)*

Name (Last, First Middle Initial)
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## **Privacy Act Statement**

You are requested to furnish this information under the authority of 42 U.S.C. § 2000e-16, which requires that Federal employment practices be free from discrimination and provide equal employment opportunities for all. Solicitation of this information is in accordance with Department of Commerce Directive 15, "Race and Ethnic Standards for Federal Statistics and Administrative Reporting."

Your furnishing this information is **voluntary**. Your failure to do so will have no effect on you or on your application for Federal employment. If you fail to provide the information, however, then the employing agency will attempt to identify your race and national origin by visual perception.

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**Specific Instructions:** The categories below are designed to identify the basic racial and national origin category. If you are of mixed racial and/or national origin, identify yourself by the category with which you most closely identify yourself. Select the appropriate category.

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## **Name of Category**

(Select ONE only)

## **Ethnicity**

Please save this entire application and email it to [USACAC.AUSAHiring@usdoj.gov](mailto:USACAC.AUSAHiring@usdoj.gov)

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*For CDCA only*