

## OFFICE OF THE KANKAKEE COUNTY STATE'S ATTORNEY

### JIM ROWE STATE'S ATTORNEY

450 E. Court St., 3rd Floor Kankakee, IL 60901

#### Volunteer Intern/Clerk Application

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High School Senior Undergrad Graduate Student Law Student (1L) (2L) (3L)

Application Term

Fall Spring Summer Year

# This Section For Law Student Applicants Only Are you eligible to apply for a 711 license? \_\_\_\_\_ If no, when will you be eligible to apply? \_\_\_\_\_ \*\*If you are a current 711 applicant, please attach a copy of your 711 license with the application. \*\* 711 license information is available on the website: <a href="http://www.illinoiscourts.gov/Administrative/forms/711/">http://www.illinoiscourts.gov/Administrative/forms/711/</a> or from your Law School Career Services Office. 711 Clerkships are available only for qualified students who have at least one-half of the total hourly credits required to graduate from law school. All clerkships expire upon graduation from law school.

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 Kankakee County State's Attorneys' Office is an equal opportunity employer. It is the policy of The Kankakee County State's Attorneys' Office that applicants for internships are recruited, selected, and hired on the basis of individual merit and ability with respect to the position to be filled.

PLEASE PRINT CLEARLY AND LEGIBLY

# 

E-mail Address

## **Driver 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 suspend	ded, revoked or canceled in any state?
Yes No	
If "Yes", list the state and explain:	

**Work & Volunteer History** 

(PLEASE ATTACH YOUR RESUME TO THIS APPLICATION)

# Education

Are you currently enrolled as a student? If yes where													
Year in school:				_ Curre	ent GPA:			Expecte	ed Gradu	ation D	oate:		
List the schools you	ı hava a	ttandad a	long	ith the e	thar infa	motion	raquirad	ı					
List the schools you						Illation	Years Dates Attended				Graduated?		
	1141	Name and Address of school		C	Completed		Dates / Ittended		YES or NO				
High School													
Colleges or													
Universities													
Law/Graduate													
School													
List other formal ar	nd sneci	al trainin	g cours	es that r	nav he re	  evant t	o this no	sition					
Dist other formar ar	ia speci	ar trannin	g cours	cs that i	nay be re	ic vanit t	o tins po	3111011.					
List any foreign lan	guages	you spea	k and ir	ndicate	your prof	iciency	by placii	ng an "X	' in the ar	propria	ite space.		
Language		Reading		Speaking		Understanding			Writing				
	Exc	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair	Exc	Good	Fair	
T 1'					<i>~</i>								
Indicate special comp	uter skil	ls or progi	rams you	ı may be	proficient	ın.							

		your internship opportunities. This nity Commission and will only be us		
Sex: Female Male	<u> </u>			
Racial or Ethnic Classification	1:			
White	Black or African American	Hispanic or Latino	Other	
List the days/hours you wi	ll be available to work betwe	en the hours of 8:30am – 4:30pm		
	Start time	End time		
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday bond court*				
		urs (9am—12pm); during the afterno siring to maximize their courtroom tin		
Date you would like to begin your internship:				
Date you expect to complete the internship:				

#### IN WHAT AREA OF THE OFFICE WOULD YOU LIKE TO VOLUNTEER?

Placement is based upon the needs of the office. We try to accommodate your areas of interest; however, that is not always possible and your assignment may change due to the changing needs of the office. Interns should be prepared to assist in any or all areas as needed.

Please note your preference by ranking the following divisions from 1-5, with #1 being your strongest interest: Criminal Prosecutions Bureau Government Relations / Civil Division Victim & Witness Assistance Program (undergraduate, graduate and law students only) Traffic Prosecutions (must be 711 eligible/licensed) DUI Prosecutions Division Legislative/Legal Research (undergraduate, graduate and law students only) Community Relations & Outreach Paralegal (undergraduate and paralegal students only) Other (please describe)

## Release Form

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

- 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 Kankakee County State's Attorneys' 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 an internship to be rescinded, or if already interning in the office immediate termination, regardless of when discovered.
- AUTHORIZATION and RELEASE: I authorize the Kankakee County State's Attorneys' Office to conduct a complete and thorough investigation of my qualifications for an internship 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 an internship 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.

**INTERN-AT-WILL**: I understand and agree that my internship is terminable at will. Both the State's

Attorneys' Office and I remain free to end our internship 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 (if applicable) / ISSUING STATE Contact in case of emergency: Name/Address/Phone/Relation IF APPLICANT IS UNDER THE AGE OF 18 YEARS OLD: I, the parent/guardian of the above applicant, consent to the applicant making an application to the Kankakee County State's Attorneys' Office for an internship. I further consent to the above Authorization & Release and all other terms of this Application on behalf of the applicant. I further verify that all information provided in this application is true and accurate. Parent signature Print Parent/Guardian Name if applicant is under 18 years of age

Parent/Guardian Telephone #

#### **SOCIAL MEDIA POLICY FOR INTERNS & VOLUNTEERS**

The Kankakee County State's Attorneys' Office represents all the people of Kankakee County, and we take that responsibility very seriously. When you intern in the State's Attorneys' Office you are a reflection of this office, and your social media activity is a reflection of you. We will not tolerate interns who engage in inappropriate behavior on social media, including but not limited to cyber-bullying, threatening or disparaging posts, posting inappropriate photographs depicting or implying gang affiliation or gang colors, violence, alcohol- or drug-use, the use of inappropriate or discriminatory language, or any conduct, behavior or communications that portray you or the office in a negative light. Any such conduct or perceived conduct shall be immediate cause for termination from the internship program. Applicants to the office are strongly encouraged to review their existing social media pages before applying for an internship, because we will.

Additionally, the business of the State's Attorneys' Office is serious and sensitive. You are expected to maintain confidentiality of all communications and information learned or overheard in the office. The dissemination of any information, photographs or communications connected to your internship either in the community or upon social media shall be immediate cause for termination from the internship program.

UNDERSTOOD:		
Signature		

## Incomplete applications will not be considered

#### COMPLETED APPLICATION CHECKLIST

 Application (complete, accurate, all required signatures)
Resume (attached)
Writing Sample (law students only)
Acknowledgement of Social Media Policy (signed)

Please return your completed application to:
Office of the Kankakee County State's Attorney
Attn: Clerkship/Internship Program
450 E. Court St., 3rd Floor
Kankakee, Illinois 60901

or via Email: JRowe@K3County.net