



**OFFICE OF THE STATE'S ATTORNEY  
COOK COUNTY, ILLINOIS**

**KIMBERLY M. FOXX**  
STATE'S ATTORNEY

69 W. Washington, Suite 3200  
Chicago, Illinois 60602

Employment Application

Status

Licensed Attorney

3<sup>rd</sup> Year Law Student

(Circle One)

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 Cook County State's Attorney's Office is an equal opportunity employer. It is the policy of The Cook County State's Attorney's Office that applicants for employment are recruited, selected, and hired on the basis of individual merit and ability, with respect to position to be filled and potential for promotions or transfers which may be expected to develop. Applicants are recruited, selected, and hired without discrimination because of race, color, creed, religion, ancestry, national origin, age, sex (including gender identity, sexual orientation and pregnancy), genetic information, citizenship, military service, marital status, parental status and disability. Furthermore, personnel procedures and practices with regard to training, transfer, compensation, demotion, layoff or termination are to be administered with due regard to job performance, experience and qualification, but without discrimination because of race, color, religion, sex, national origin, disability, sexual orientation, pregnancy, marital or veteran/military status. **PLEASE PRINT CLEARLY AND LEGIBLY**

**Personal Information**

DATE \_\_\_\_\_

Name \_\_\_\_\_  
First Middle (Maiden Name) Last

Address \_\_\_\_\_

Phone \_\_\_\_\_  
Daytime Evening

E-mail Address \_\_\_\_\_

Law School \_\_\_\_\_ Graduation Date \_\_\_\_\_

Have you previously applied, interviewed or worked in any capacity within the office? If yes, please provide details and attach a separate sheet if necessary.

**Veterans Information**

Are you or have you been an active member of the military service or the United States Reserve Units, National Guard, or an alternative service under the Selective Service Act?

Yes       No

Branch of Service: \_\_\_\_\_

List your service dates:

Date of Entry: \_\_\_\_\_

Date of Discharge: \_\_\_\_\_

What was your military occupation classification? \_\_\_\_\_

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**\*\* COMPLETE THIS SECTION IF YOU ARE A LICENSED ATTORNEY\*\***

Date of Illinois License \_\_\_\_\_

ARDC # \_\_\_\_\_

Additional State/Federal Licenses and Dates

\_\_\_\_\_

Have you represented a party or witness in any proceeding wherein this office is involved?  
If yes, please provide details and attach a separate sheet if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In which Bureau are you interested? Please rank your level of interest within each Bureau using 1-5, 1 being the highest:

Criminal Prosecutions \_\_\_\_\_      Special Prosecutions \_\_\_\_\_      Civil Actions \_\_\_\_\_

Narcotics \_\_\_\_\_      Juvenile Justice \_\_\_\_\_

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**\*\*THE REMAINDER OF THE APPLICATION SHOULD BE COMPLETED BY ALL APPLICANTS\*\***  
**Background checks of all applicants will be conducted prior to any interviews**

**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 suspended, revoked or canceled in any state?  Yes  No  
If "Yes", list state and explain:

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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**

**Please note if you answer yes to any of the questions in the Criminal Information Portion, you must provide comprehensive details and attach a separate sheet if necessary. Failure to provide details may result in removal from consideration.**

Have you ever plead guilty or been convicted of a felony or misdemeanor criminal violation of any federal, state, county or municipal law or ordinance (including any domestic violence offense)?

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Crime Charged

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Police Agency

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Date of Incident

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Disposition of the Case

Have you ever been arrested or detained by the police? \_\_\_\_\_

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Crime Charged

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Police Agency

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Date of Incident

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Disposition of the case

Have you ever been the subject of a criminal investigation whether or not you were arrested?

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Have you ever been placed on probation or supervision?

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**Education**

List the schools you have attended along with the other information required

	Name and Address of school	Years Completed	Dates Attended	Graduation YES or NO
Colleges or Universities				
Law/Graduate School				

List other formal and special training courses that may be relevant to this position

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List professional licenses or certificates you hold or have held

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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 qualifications not covered by the above questions (i.e. patents owned, published author, honors and fellowships received, etc.)


<b>References</b>			
List the names of three adults not related to you, who have known you for a period of at least 5 years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality, and other qualities.			
1. Name: #:	Address:	Home Phone #:	
Business Address: Years Known:	Business Occupation:	Business Phone#:	
2. Name:	Address:	Home Phone#:	
Business Address: Years Known:	Business Occupation:	Business Phone#:	
3. Name:	Address:	Home Phone#:	
Business Address: Years Known:	Business Occupation:	Business Phone#:	

<b>Employment History</b>							
List all jobs you have held for the last ten years, including periods of unemployment. Include military service, temporary and part-time work. Start with your most recent job. Attach a separate sheet if necessary.							
1.	Employer's Name		Address		Phone Number		Type of Business
	Name and Title of supervisor		Exact title of position		Monthly salary	Start Date	End Date
Explain what your duties were				Reason for leaving			
2.	Employer's Name		Address		Phone Number		Type of Business
	Name and Title of supervisor		Exact title of position		Monthly salary	Start Date	End Date
Explain what your duties were				Reason for leaving			

3.	Employer's Name	Address	Phone Number	Type of Business		
	Name and Title of supervisor	Exact title of position	Monthly salary	Start Date	End Date	
Explain what your duties were			Reason for leaving			
4.	Employer's Name	Address	Phone Number	Type of Business		
	Name and Title of supervisor	Exact title of position	Monthly salary	Start Date	End Date	
Explain what your duties were			Reason for leaving			

Please highlight any aspect of your education or experience which may be helpful in evaluating your application:

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Why are you interested in employment with the Office of the Cook County State's Attorney?

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The following information is optional and in no way affects your employment opportunities. This information complies 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



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Fax: (312) 603-9689

## 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 background 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





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**Completed Application Checklist**

- \_\_\_\_\_ Application
- \_\_\_\_\_ Signed Release Form
- \_\_\_\_\_ Official or /Un-Official Transcript  
*(Self-prepared transcripts will not be accepted)*
- \_\_\_\_\_ Resume
- \_\_\_\_\_ One Letter of Recommendation
- \_\_\_\_\_ Writing Sample  
*(Not to exceed ten pages)*
- \_\_\_\_\_ Cover Letter

**Please note if any materials will be sent separately**

**Incomplete Applications will not be considered**

Please return your completed application to:  
Office of the Cook County State's Attorney  
Attn: Legal Hiring  
69 W. Washington, suite 3200  
Chicago, Illinois 60602  
Email: [attyhire@cookcountyil.gov](mailto:attyhire@cookcountyil.gov)

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