

CRIME VICTIM COMPENSATION BOARD APPLICATION 21ST JUDICIAL DISTRICT

Please attach current resume and letter of interest to this application.

APPLICANT INF	ORMATION				
Name (Last, First, 1	Middle):				
Home Address:		_	City:	Zip Code:	
Date of Birth:		Gender:	Race (Optional):	African America Native A	*
Primary Phone #:		Secondary			
Email Address:					
Present Employer/	Occupation:				
Business Address:					
EDUCATION AN	D GENERAL QUALI	FICATIONS			
LEVEL	NAME OF SCHOOL	LOCATION	# OF YEARS ATTENDED	DID YOU GRADUATE?	MAJOR COURSE OF STUDY
High School					
College					
Graduate Studies or Trade/Business/ Correspondence					
Memberships in					
Organizations and					
Offices Held					
(Indicate if Past					
or Present)					
Special Skills and					
Qualifications					
	ist three persons not r	elated to you, who you	have known f	for at least one	vear)
NAME		ADDRESS	nave known i	PHONE #	
Is there anything	in your background that m	ight be an embarrassment to	the District Atto	rney or you if it w	vere to become public?
		If YES, please explain in an			r
contained herein and the Attorney's Office, 21st 3	ontained in this application are references listed above to ob- fudicial District, to conduct a	e true and correct to the best o tain any and all pertinent info criminal background check, in or any damage that may result	f my knowledge. rmation, personal acluding requestir	I authorize investig and otherwise. I for an a criminal histor	urther authorize the District
I understand that the Cogeneral public.	lorado Open Records Act ma	y require that certain informat	ion contained in t	his application be	available for inspection by the
SIGNATURE:					
DATE:					-