



## **Summer 2025 APPLICATION**

Approximately 6 to 8 students will be selected to participate in this program. Applications must be submitted to the Texas Access to Justice Commission, by **4pm CST, Friday, February 28, 2025**. Selected students will be announced by Tuesday, March 11, 2025.

Send your completed application, a Supervising Attorney Statement (Addendum A, downloadable separately), and a current resume by email:

Texas Access to Justice Commission  
Email: [atjmail@texasatj.org](mailto:atjmail@texasatj.org)

**Completed applications must be received in our office by February 28, 2025.**

### **A. General Applicant Information**

Title: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Are you bilingual?: \_\_\_\_\_ If so, in what other language(s) are you fluent? \_\_\_\_\_

Street Address: \_\_\_\_\_ Apartment No.: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address\*: \_\_\_\_\_

Secondary Email Address\*: \_\_\_\_\_

\*You must provide a current email address to receive updates and information from the Commission about your application submission. If your email address or other contact information changes, you must contact the Commission immediately with the updated information.

**B. Applicants' Law School Information**

What law school do you attend?: \_\_\_\_\_

What is your current law school GPA?: \_\_\_\_\_

What is your expected date of law school graduation?: \_\_\_\_\_

How many semesters of law school will you have completed as of May 31, 2025? \_\_\_\_\_

What law school clinic(s) have you completed or do you expect to complete as of May 31, 2025?

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**C. Applicants' Personal Statements**

What are your reasons for applying for the Access to Justice Internship Program?

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Please describe your work experiences working (paid or volunteer work) with the low-income community. You should include brief examples that clearly demonstrate your previous contact with community and/or public service work.

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What skills, experiences, talents, commitments, and/or interests do you have that would support your selection to the ATJIP?

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If you are selected, what would you like to accomplish through the ATJIP?

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What are your employment goals after law school?

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**D. Legal Aid Provider Placement Location Selection**

You are responsible for contacting a legal aid program and securing an internship. If you want to apply but are uncertain of what programs are available in your area, please email us; we will help guide you.

You must attach the affidavit signed by the supervising attorney associated with the legal aid program, which acknowledges a mutual agreement of your working as an intern during the placement period (Section G of this application).

Program Name: \_\_\_\_\_

Program Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

*I am applying for Summer 2025 (a minimum of 400 hours).*

**E. Applicants' Supporting Documentation**

Please attach a copy of your current résumé.

Please attach your supervising attorney's statement.

**F. Acceptance of ATJIP if Selected**

By my initials and signature below, I certify that the information included in this application is true and correct, and I have completed this application to the best of my abilities. Further, by my initials and signature below, I agree to and understand the following:

\_\_\_\_\_ I understand that I must secure a proposed placement with an approved program prior to being selected as an intern with the ATJIP and assigned to work at a legal aid program.

\_\_\_\_\_ If I am selected as a participant in the ATJIP, I understand I will be a temporary employee of the program where I am assigned. I understand I will be subject to that program's personnel and human resources policies.

\_\_\_\_\_ If I am selected as a participant in the ATJIP, I understand and agree I have made a personal and professional commitment to participate and will not withdraw from the program without the express written permission of the Texas Access to Justice Commission.

\_\_\_\_\_ If I am selected as a participant in the ATJIP, I understand I will be issued a 1099 at the end of the year, and the stipend I earn is considered taxable income. I am responsible for ascertaining my own tax liability. I understand that if my internship covers two taxable years, I will receive a 1099 at the end of each year.

\_\_\_\_\_ If I am selected as a participant in the ATJIP, I will work with a legal aid program in Texas for a minimum of 400 hours between June and August 2025.

\_\_\_\_\_ If I am selected and *participate* in the Commission's ATJIP, I will submit an essay, a minimum of 1,000 words, that details my internship experience *no later than August 26, 2025*. The respective law school may use the essay to highlight the internship experience. It may be published as a news release in connection with the annual Pro Bono Week celebration, on the Commission's website, social media platforms, and/or other places the Commission sees fit.

\_\_\_\_\_ If I am selected as a participant in the ATJIP, I understand I must provide a current email address in order to receive updates and information from the Commission about my application submission. If my email address or other contact information changes, I will contact the Commission immediately with the updated information.

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Signature

