



**Access to Justice Internship Program (ATJIP)**  
***Summer 2024 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, Tuesday, February 20, 2024.** Selected students will be announced by Monday, March 4, 2024.

Send 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 20, 2024.**

**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 in order 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.

## Access to Justice Internship Program – Summer 2024 (cont.)

### B. Applicant's 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, 2024? \_\_\_\_\_

What law school clinic(s) have you completed or do you expect to complete as of May 31, 2024?

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### C. Applicant's 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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## Access to Justice Internship Program – Summer 2024 (cont.)

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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?

### D. Legal Aid Provider Placement Location Selection

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\_\_\_\_\_

\_\_\_\_\_

It is your responsibility to contact a legal aid program and secure an internship position with the program. If you want to apply but are uncertain of what legal aid programs are available in your area, please email us and 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: \_\_\_\_\_

## Access to Justice Internship Program – Summer 2024 (cont.)

*I am applying for Summer 2024 (a minimum of 400 hours).*

### E. Applicant's Supporting Documentation

Please attach a copy of your current résumé.

Please attach the statement of your Supervising Attorney.

### F. Acceptance of ATJIP if Selected

By my initials and signature below, I certify 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 prior to being selected as an intern with the ATJIP and assigned to work at a legal aid program, I must secure a proposed placement with an approved 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 further understand that if my internship covers two taxable years, I will receive a 1099 at the end of each taxable year.

\_\_\_\_\_ If I am selected as a participant in the ATJIP, I will be working with a legal aid program in Texas for a minimum of 400 hours between June – August 2024.

\_\_\_\_\_ If I am selected and *participate* in the Commission's ATJIP, I will submit an essay, minimum 1,000 words, that details my internship experience *no later than August 26, 2024*. The essay may be used by the respective law school to highlight the internship experience and 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 as other places as 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.

\_\_\_\_\_  
Signature