



UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK

CJA ATTORNEY SWIPE CARD APPLICATION

Eastern District of New York (“EDNY”) courthouse swipe cards are issued to current members of the EDNY CJA panel only after completion of this application and a suitability determination based upon a fingerprint check and criminal background investigation. If approved, the swipe card will permit expedited entry into the courthouse.

When an attorney is reappointed to the CJA Panel after the expiration of the attorney’s three-year term, a swipe card renewal application must be submitted within thirty (30) days after reappointment.

Any attorney who resigns or is removed from the EDNY CJA Panel must return the swipe card to the Clerk of Court immediately.

Applications (3 pages in total) must be submitted to the Clerk of Court at either of the following courthouse addresses.

United States District Court
Eastern District of New York
225 Cadman Plaza East
Brooklyn, NY 11201

United States District Court
Eastern District of New York
100 Federal Plaza
Central Islip, NY 11722

New Application
Renewal Application

Date Submitted _____
Date Submitted _____ Swipe Card Number _____

Contact Information

- Last Name _____
- First Name _____ MI _____
- Law Firm _____
- Business Address _____
- City _____ State _____ ZIP _____
- Office Phone _____ Mobile Phone _____
- Email Address _____

ACKNOWLEDGEMENTS TO BE INITIALED AND SIGNED:

- I hereby acknowledge that I am in receipt of an EDNY courthouse swipe card, and that this credential is nontransferable. _____
- I will notify the EDNY Clerk of Court of any changes in my law firm affiliation while I am in possession of this credential. _____
- I will promptly disclose to the EDNY Clerk of Court any future arrest, convictions, or disciplinary actions taken against me by any grievance committee or court. _____
- I hereby acknowledge that the EDNY reserves the right to suspend or rescind this credential at any time for any reason. _____
- If, at any time, I am no longer a member of the EDNY CJA Panel, I will surrender my EDNY credential to the Clerk of Court. _____
- Pursuant to 18 U.S.C. § 930(e), the possession or attempted possession of firearms or other dangerous weapons in a federal courthouse is strictly prohibited; any violation may result in fines and/or imprisonment. _____

Signature _____ Date _____



UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK

**AUTHORIZATION TO RELEASE INFORMATION REQUESTED
PURSUANT TO BACKGROUND INFORMATION**

I, _____, consent to submission of fingerprints and a criminal background investigation conducted by the United States District Court for the Eastern District of New York in connection with my application for courthouse access as a current member of the CJA Panel of the Eastern District of New York.

I consent to and authorize the disclosure of all information the United States District Court deems relevant to the evaluation of my eligibility to hold a position of public trust. I authorize the disclosure of such information to the United States District Court including, but not limited to, criminal records if any, and files and records of governmental bodies and credit agencies.

I hereby waive any privilege of confidentiality with respect to the release of any such information to the United States District Court.

This original document shall remain on file at the United States District Court for the Eastern District of New York, for this and any future reports or updates that may be requested.

Further information may be made available upon written request within a reasonable period of time.

Signature

Date

Certification: I attest, under penalty of perjury, that: (1) I have examined the identification documents(s) presented by the above-named applicant and (2) I certify that the above-named applicant voluntarily signed this original copy of the authorization for the purposes stated.		
Signature of Authorized Representative	Today's Date	Name and Title of Authorized Representative

Applicants have the right to request copies of background investigation records under the Freedom of Information Act, 5 U.S.C. § 552 and the Privacy Act, 5 U.S.C. § 522a.

BACKGROUND INVESTIGATION IDENTITY INFORMATION

Last Name _____ First Name _____ MI _____
 Alias or Other Names Used in the Past _____
 Home Address _____
 City _____ State _____ ZIP _____
 Phone Number _____ Mobile Number _____
 Email Address _____
 Social Security Number _____ Date of Birth _____
 Hair Color _____ Eye Color _____
 Weight _____ Height _____
 Place of Birth _____ Citizenship _____
 Gender _____ Ethnicity _____

BACKGROUND INVESTIGATION QUESTIONS

If you check yes to any of these questions, provide the required explanations.

1. Have you ever been convicted, imprisoned, on probation, or on parole? (Include felonies, firearms or explosives, violations, misdemeanors, and all other offenses) Yes No
 - a. If yes, provide the date, explanation of violation, place of occurrence, and name/address of police department or court.

2. Have you every been convicted by a military court martial? Yes No
 - a. If yes, provide the date, explanation of violation, place of occurrent, and name/address of military authority or court.

3. Are you now under charges for any violation of law? Yes No
 - a. If yes, provide the date, explanation of violation, place of occurrence and name/address of police department or court.

4. Have you ever been fired from any job for any reason, have you quit after being told that you would be fired, have you left any job by mutual agreement because of specific problems, or have you been debarred from federal employment by the Office of Personnel Management or any other federal agency? Yes No
 - a. If yes, provide the date, explanation of problem, reason for leaving, and employer's name/address.

Signature

Date