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## Western District of North Carolina Student Intern Policy

### **QUALIFICATIONS FOR APPOINTMENT OF STUDENT INTERN**

The student intern shall be a junior, senior, or graduate student with good class standing.

- The United States District Court prefers students who have completed at least one to two years of the Paralegal and/or the Legal Studies Programs.
- The student intern shall have no convictions other than minor traffic infractions.

### **APPLICATION AND SELECTION PROCESS**

In an effort to obtain mature students who are sincerely interested in the legal studies fields, the following procedures have been formulated for the selection of student interns.

- Interested students are requested to forward to the Operations Supervisor:
  - A letter of interest
  - An intern application
  - A letter affirming qualification for internship from the appropriate faculty representative of the college or university
  - A copy of graduate and/or undergraduate transcripts
- All intern applications should be provided no later than one month prior to the term in which the internship is anticipated. Applicants shall be mailed to the Operations Supervisor.
- The Operations Supervisor will contact selected students and arrange for them to visit the United States District Court for the purpose of a personal interview will determine eligibility of the applicant and appropriate unit placement, if relevant. Selection of student interns will be made in advance of the beginning of the term or semester for which the student intern will serve.
- The Operations Supervisor for the Western District of North Carolina are as follows:

Asheville Division- Tammy H. Hightower Charlotte Division- Jayna Errico (not currently accepting internships applications)

### **CONDITIONS OF APPOINTMENT**

All students who are selected for an internship will be required to sign an Acknowledgement of Gratuitous Services Form specifying that they will maintain confidentiality of all case information during and after the course of their affiliation with the Clerk's Office. In addition, student interns will be required to sign an Acknowledgment of Risk form, acknowledging potential risks associated with their duties as a student intern.

A background investigation will be conducted at the appropriate District Court under the direction of the Operations Supervisor. The investigation will include, but not be limited to the following:

- Both ATLAS and local criminal history records checks of applicant (using employment J Code, run only by an ATAC with CUSPO or DCUSPO approval)
- FBI Fingerprint check (to be processed the first day of internship, or prior to the first day of internship)
- Inquiries/references from two previous employers
- A financial inquiry to include a credit check (optional)

All students selected for internship are considered volunteer employees of the judicial branch and are required to take the oath of office no later than the first day of appointment, or prior to the first day of appointment. For this reason, interns are also required to submit verification of employment eligibility under U.S. Immigration law.

At the time of appointment, student interns will be informed as to the specific length of their affiliation with the United States District Court, including dates of entry and termination by signing an Acknowledgment of Gratuitous Services and Waiver.

The Operations Manager will review the district's Computer Resources Acceptable Use and Security Policy and obtain appropriate signatures of the User Memorandum of Agreement.

The Operations Manager will review the Code of Conduct adopted by the Judicial Conference of the United States and obtain appropriate signatures of acknowledgment available at the following link: .

Interns will also be required to complete an Intern Emergency Notification from which will be kept by the Operations Manager with copies distributed to the designated Deputy Chief's Office.

### **STUDENT INTERN RESPONSIBILITIES**

In order for student interns to obtain maximum education benefits without compromising the District Court's operations, they are expected to comply with the administrative policies of the U.S. District Court throughout the duration of their internship.

- All student interns are expected to adhere to the Code of Conduct adopted by the Judicial Conference of the United States.
- All written communications prepared by student interns that are to be forwarded to the courts, law enforcement agencies, community agencies, etc., must be first given to the Operations Supervisor with whom the intern is working, for final advice and approval.
- Student interns should report to their field placement on the days assigned. In the event the student intern is late or cannot report to work, the Operations Supervisor should be notified as soon as possible.
- Student interns are encouraged to attend all general staff meetings as well as unit meetings on days when they are performing internship activities.
- Assist Deputy Clerks in the performance of tasks generally required of staff, under the direction, guidance, and supervision of the Operations Supervisor.
- Refrain from personal relationships with defendants.
- Carry District Court's identification with them at all times while performing duties of a student intern. This identification will be returned upon completion of the internship.
- Student interns experiencing any problems in the student intern program should address the issues with the Operations Supervisor or the person with whom they are working.
- Upon completion of the internship, each student will be mailed an evaluation form to be completed and mailed back to the United States District Court.
- All papers completed by the student intern that identify the U.S. District Court will be shared with the District Court and maintained in the District Court student intern file.
- Student interns shall serve without compensation from the United States District Court.

## **RESPONSIBILITY OF THE OPERATIONS SUPERVISOR**

- The designated Chief Deputy will maintain overall responsibility for the supervision of the internship program.
- A Deputy Clerk(s) will be designated for each student intern. The Operations Supervisor or the assigned Deputy Clerk will perform the functions as described elsewhere in this policy.
- The Operations Supervisor in each District Court Office will provide guidance and supervision that is essential for the proper training and guidance of student interns.
- Assignments should include opportunities to observe court functions and a variety of functions within the Clerk's office.
- If any problems occur or concerns arise during the internship, the Operations Supervisor should immediately bring them to the attention of the Chief Deputy.
- If a performance evaluation is completed on the intern it must be approved in advance by the Chief Deputy. No performance evaluation should be distributed to an intern or to the faculty representative of the college or university without the approval of the Chief Deputy.

## <u>FORMS</u>

These forms will be used in conjunction with the Student Intern Program, and all original documents shall be sent to the HR Specialist. The HR Specialist will provide the designated DCUSPO with the applicants' forms.

- Application of Internship.
- Authorization of Release Information.
- Acknowledgment of Gratuitous Services and Waiver.
- Personal Data for Critical Incident Form.
- Fingerprint Card for FBI fingerprint check.
- I-9 U.S. Immigration compliance.
- Acknowledgment of Code of Ethics and Conduct.

- Student Intern's Evaluation of the U.S. District Court.
- U.S. Department of Justice Background Request.

#### EXTENT AND NATURE OF DUTIES TO BE ASSIGNED TO STUDENT INTERNS

An initial orientation and structured training program will be conducted by the Operations Supervisor.

#### Student Interns Will Not:

- Be placed in any situation with a defendant that could jeopardize their safety.
- Drive government vehicles.
- Sign any document relating to any function of the District Court Office without an approving signature of the Operations Supervisor.
- Release confidential information.
- Use/access anything that requires a login and password other Lotus Notes, CM/ECF and CVB.

#### Personal Data Sheet for Critical Incident Response Team

NAME:	
Address (include directions):	
Home Telephone Number:	
Home Email Address:	
Work Location:	

Supervisor:

\*\*\*\*\*

#### In the event of emergency, contact:

Name:

Address:

Home Telephone Number:

**Home Email Address:** 

**Employment:** 

Work Address:

Personal Cell Number:

Office Telephone Number: Office Cell Number:

Office Telephone Number:

**Relationship:** 

**Personal Cell Number:** 

Job Title:

**Office Telephone Number:** 

\*\*\*\*\*\*

#### Next of Kin (other than above):

Name:

Address:

Home Telephone Number:

Home Email Address:

**Employment:** 

Work Address:

**Relationship:** 

**Personal Cell Number:** 

Job Title:

**Office Telephone Number:** 

\*\*\*\*\*\*

Special instructions regarding notification of family members, including minister's name and phone number:

PLEASE KEEP YOUR PERSONAL DATA SHEET UP TO DATE AS CHANGES OCCUR

AO 196A (Rev. 11/10)

## ACKNOWLEDGMENT OF GRATUITOUS SERVICES AND WAIVER

I,		, hereby	declare that my services to be
performed from approximately		to	in the capacity of
	to		
in the United States			(court or office) are to be rendered
solely as a volunteer. I hereby v	vaive any clain	n or right to receive s	alary or other compensation in
consideration for the performance	ce of duties ass	igned by	

I acknowledge that I am not entitled to receive civil service retirement credit or other related personnel benefits as a consequence of this voluntary employment, except that in the event of any personal injury incurred by me, I shall have those rights to compensation, if any, which may be provided by statute to persons rendering voluntary services to the United States. I further recognize that, as an employee of the United States, I retain no personal copyright privileges in any work product prepared by me in the course of this employment. Finally, I recognize that information which I obtain or to which I shall have access in the course of my employment is often of a confidential nature, and I agree to preserve the confidentiality of such information.

Name		
Date		
Witness		
Date		

Pursuant to the authority vested in the Director of the Administrative Office of the United States Courts by 28 U.S.C. § 604(a)(17) and by delegation of this authority from the Director, I hereby accept and authorize the utilization of the gratuitous services described above.

## AUTHORIZATION TO RELEASE INFORMATION PRIVATE PERSON OR ORGANIZATION TO DISTRICT COURT

TO WHOM IT MAY CONCERN:

I, \_\_\_\_\_, SSN #\_\_\_\_\_ the undersigned, hereby authorize the United States Probation Office for the Western District of North Carolina or its authorized representatives or employees, bearing this release or copy thereof, to obtain any information in your files pertaining to my:

- Criminal Record

- Credit Report

- Educational Records

- Previous Employment (if necessary)

I hereby direct you to release information. This release is executed with full knowledge and understanding that the information is for the United States Probation Office's official use. The information obtained by the aforementioned probation office is to be used only for the purpose of student internship application process.

Authorizing Signature

Full Name-Printed

Date

WITNESS -

U.S. District Court, Operations Supervisor

Date

## APPLICATION FOR INTERNSHIP UNITED STATES DISTRICT COURT WESTERN DISTRICT OF NORTH CAROLINA

## Date Submitted: \_\_\_\_\_

Please provide as much detail as possible in each area as appropriate. Attach additional pages if necessary.

## PERSONAL INFORMATION

Full Name	Maiden Name			
Address				
City/State	Zip Code			
Home Phone	Work Phone			
Date of Birth	Place of Birth			
Social Security Number	Citizenship			
Driver's License Number				
Have you ever been convicted of a crime? Yes No				
If yes, please explain:				
If employed, list the name of your direct supervisor:				
If employed, may we contact your present supervisor? Yes No				
FAMILY INFORMATION				
Father's Name/Address				
Spouse's Name				

## SKILLS

Are you familiar with Word Processing programs	? Yes No
If yes, please list which programs	
What is your degree of competence with the abov	ve listed program(s)?
Are you fluent in any foreign languages? Yes	No
If yes, list the language(s) and your degree of prot	ficiency
EDUCATION	
Name of Undergraduate Institution	
Address	
Course of Study	_ Highest Level Completed
Year/Degree	_ Grade Point Average
Name of Graduate Institution	
Address	
Course of Study	_ Highest Level Completed
Year/Degree	_ Grade Point Average
Certifications	
Professional Affiliations	

## PHYSICAL CONDITION

Do you have a history of any emotional, medical or health conditions/problems? Yes \_\_\_\_ No\_\_\_\_

If yes, explain \_\_\_\_\_

Have you ever used any ill	legal substances?	Yes	No	
If yes, explain				

## **EMPLOYMENT HISTORY**

(Current Employment) Company Name	
Address	
Phone Number	_ Position
Dates of employment	Supervisor's Name
Reason for Leaving	
(Previous Employment) Company Name	
Address	
Phone Number	_ Position
Dates of employment	Supervisor's Name
Briefly describe responsibilities	
Reason for Leaving	

# **ADDITIONAL INFORMATION** (use this space for anything else you want us to know that is not addressed in the above)

## APPLICANT CERTIFICATION

I certify that to the best of my knowledge and belief, all the above information on and attached to this application is true, correct, complete, and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for elimination of consideration for an internship position and or immediate discharge from the internship program. I understand that any information I provide may be investigated.

## UNITED STATES DISTRICT COURT/PROBATION OFFICE WESTERN DISTRICT OF NORTH CAROLINA IT POLICY

As a user of IT resources and services of the United States Courts, Western District of North Carolina, I acknowledge receipt of a copy of the *IT Policy* and I acknowledge I:

- have fully read and understand the Policy;
- understand I am responsible for my actions while using any of the judiciary=s IT equipment resources, and will use all such IT equipment resources in accordance with the provisions in this policy and all state and federal laws;
- understand that failure to sign this acknowledgment will result in denial of access to the court=s IT equipment resources or, if otherwise authorized such access, to the judiciary's Intranet (DCN) or the Internet, online databases such as CM/ECF, PACTS, ATLAS, Westlaw, and others;
- will not attempt to gain unauthorized access to IT equipment resources or telecommunication systems, nor attempt to view or use electronic files for which I am not specifically authorized;
- understand I am responsible for maintaining the current level of security available on any IT equipment I use that is connected to the court=s network or connected to the DCN via a VPN session;
- understand I am responsible for the proper use, care and reasonable protection from damage or loss of equipment that I use and will return it to the court in good condition, excluding normal depreciation at the end of my period of employment;
- will not take any actions which will jeopardize the security of the judiciary's network or other automated information systems after my departure from employment with the court;
- understand and acknowledge the issues and requirements associated with Social Networking;
- understand my violation of any provision of this policy may result in disciplinary action which may include termination of employment;
- acknowledge my responsibility NOT to download or install executable software onto any IT equipment without permission;

Revised 02/2015

• understand that all telecommunications and IT systems are subject to monitoring to ensure proper functioning, to protect against unauthorized use and to verify the presence or performance of security features.

Date \_\_/\_\_/\_\_ Intern Signature\_\_\_\_\_ Intern Name (Printed)\_\_\_\_\_

	U. S. Department of Justice
	United States Marshals Service
	Western District of North Carolina
	Charlotte, NC 28234

## Background Request Biographical Information Sheet

NAME:	
(Last, First, Middle- pleas	e use full legal names; Maiden if applicable)
ADDRESS:	
DATE OF BIRTH:	
SOCIAL SECURITY NUMBER	:
RACE:	SEX:
EYE COLOR:	HAIR COLOR:
PLACE OF BIRTH:	Scars, Marks, Tattoo(s):

Information contained in this form is only being used by the United States Marshals Service for the purpose of a background records check. It will be maintained by the United States Marshals Service and will not be released to anyone. If all of the information is not provided, the United States Marshals Service will not clear you for security purposes.

### **CERTIFICATION:**

I certify that to the best of my knowledge that all of the information is true, correct, and complete. I understand that any false or fraudulent information may be grounds for initiation of a criminal investigation in reference to Title 18 United States Code 1001. I understand that any information provided may be utilized as a part of this investigation.

Signature:\_\_\_\_\_

Revised 02/2015

# Statement of Acknowledgment and Understanding of the Judicial Code of Ethics and Conduct

I \_\_\_\_\_\_ hereby acknowledge that I have read the Vol 2: Ethics and Judicial Conduct Part A and I understand the requirements as a student intern.

Signed:\_\_\_\_\_

Dated: \_\_\_\_\_

## Intern's Evaluation of the U.S. District Court Clerk's Office Intern Program

Please return the completed form to your sponsor/coordinator at the end of your internship.

- 1. What were the strengths of the internship program?
- 2. Do you feel that you benefitted from the program? How so? If not, why?
- 3. Identify any area for improvement of the intern program. Please explain
- 4. As an intern did you feel that you had plenty to do?
- 5. In your opinion, was too much expected of you during your internship?
- 6. Was there any experience you wanted to do or see, but did not?
- 7. What was the least favorite thing that you experienced during your internship?
- 8. What was the most valuable experience that you feel that you had during your internship with this agency?

Name:	Date:	
Office:	Sponsor:	

Thank you for providing an evaluation of our program. We are hopeful that the experience was a good one for you, and wish you the best in your chosen career. If we can ever be of assistance, please do not hesitate to call us.