

**Application for 2021 Trial Attorney Conflict of Interest Contract for Salt Lake County**

1. Organization or group requesting contract: Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_

2. Attorneys who will fulfill services if contract is awarded:

_____	_____	_____
Name	Utah Bar No.	Date admitted to Utah Bar
_____	_____	_____
Name	Utah Bar No.	Date admitted to Utah Bar
_____	_____	_____
Name	Utah Bar No.	Date admitted to Utah Bar
_____	_____	_____
Name	Utah Bar No.	Date admitted to Utah Bar
_____	_____	_____
Name	Utah Bar No.	Date admitted to Utah Bar

Add additional pages if necessary.

3. Attach a resume for each attorney listed above or on additional pages, including all places and dates of employment since admission to the Utah State Bar, and the attorney’s email address, physical address, and phone number.
4. Provide the following information about each of the attorneys who will be providing services if a contract is awarded:
- a. Number (to best of knowledge) of felony jury trials tried to verdict in the past five years, 2015-2020.
  - b. Number (to best of knowledge) of felony cases resolved without trial in 2019 and 2020.
  - c. Current number of open criminal defense cases.
  - d. Number of years practicing criminal defense law for at least 70% of time each year.
  - e. Hours of CLE focused on criminal defense practice in 2019 and 2020.
  - f. Hours of CLE or other learning focused on diversity or bias in the justice system in the past five years.
  - g. Special training or education regarding criminal defense practice.
  - h. Identify a social service professional and an investigator with whom the attorney has worked in representing criminal defendants.
5. Provide the name and contact information for references in the following categories:
- a. Utah lawyer practicing predominantly in the criminal defense area.
  - b. Member of the Utah judiciary.

**Signature:**

By signing below the attorneys listed above represent that all of the information provided herein and on attachments is accurate to the best of their knowledge. By signing below, the attorneys listed above acknowledge that if awarded a contract, the attorneys will be required to sign a contract with Salt Lake Legal Defender Association.

(sign on the line and print name below):

_____	Date: _____
Print Name: _____	
_____	Date: _____
Print Name: _____	
_____	Date: _____
Print Name: _____	
_____	Date: _____
Print Name: _____	

Add pages if necessary.