

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Attorney/Inmate Telephone Call Application

ATTORNEY INSTRUCTIONS

- Complete Sections I and II, except for information fields marked with an asterisk (*).
- **Fax completed form to inmate's unit of assignment. Include with fax a legible copy of your attorney bar card and driver license.**
- Confirm application approval and procedures with inmate's unit of assignment the business day prior to the requested telephone call.

NOTE: Eligible inmates shall be permitted to place calls to their attorney(s) of record, using the Inmate Telephone System (OTS), once the attorney has successfully registered, in accordance with ED-03.32.

If you have any questions regarding the completion of this form, please contact the inmate's unit of assignment.

I. INMATE IDENTIFICATION

Name: _____ TDCJ #: _____ *Unit: _____

*Custody Status: _____ *Housing Location: _____ *Job Assignment: _____

Requested Date and Time of Collect Telephone Call: _____

II. ATTORNEY INFORMATION

Name: _____ State Bar No.: _____

Address: _____

Telephone No.: _____ Fax No.: _____

(This number *must* be listed with the State bar association and accept collect calls)

Attorney Affirmation: I have an existing ____ attorney-client or ____ attorney-witness relationship with the inmate identified in this application. I understand that the confidential telephone call, for which I am applying, may not be used to accomplish any non-attorney-client or non-attorney-witness communication. **In order to facilitate this telephone call application, my client has my permission to call me collect at the above telephone number.**

Reason a personal visit or correspondence could not be used in lieu of a phone call: _____

Attorney Signature: _____ Date: _____

III. TDCJ UNIT INFORMATION
(Official Use Only)

Approved Date and Time of Collect Telephone Call: _____

Method used to verify attorney's identity:

State Bar – State: _____ State Bar Online – State _____ Other: _____

Copy of Bar Card Attached: Yes No Copy of Driver License Attached: Yes No

Authorization for an attorney/inmate telephone call will be made by the unit Access to Courts Supervisor or designee.

ATC APPROVED: Yes No Date: _____

Signature: _____ Printed Name: _____

Reason not approved: _____

Approval for an attorney/inmate telephone call must be made by a Major or higher.

UNIT APPROVED: Yes No Date: _____

Signature: _____ Printed Name: _____

Reason not approved: _____

Was call completed? Yes No Date: _____ Start time: _____ AM/PM End Time: _____ AM/PM

If call was not completed, why? _____

Employee Signature: _____ Printed Name: _____

cc: Inmate's Unit File
Unit Access to Courts Supervisor