



# Galveston County Sheriff's Office

## ATTORNEY EXPEDITED ACCESS PROGRAM APPLICATION (AEAP)

By submitting this application, the applicant agrees to comply with all rules and regulations of the Attorney Expedited Access Program (AEAP). Participation is limited to attorneys licensed and in good standing with the State Bar of Texas. Submission of an application does not guarantee acceptance into the program. All fees paid are nonrefundable.

All applicants are required to submit a new Attorney Expedited Access Program (AEAP) application annually, without exception. Applicants must review all program rules, requirements, and policies in their entirety prior to applying.

### ***Application Process:***

Applicants must meet all eligibility requirements and complete each step of the Attorney Expedited Access Program application process. Submission of an application does not guarantee acceptance into the program.

#### **1. Review Program Requirements**

Applicants must review and agree to all AEAP rules, policies, and procedures prior to submitting an application.

#### **2. Submit Application**

New applicants must complete and submit the AEAP application, including all required documents.

#### **3. Submit Payment**

Applicants are required to submit the AEAP fee to the Galveston County Sheriff's Office. All fees are nonrefundable.

#### **4. Background Check and Fingerprinting**

The Galveston County Sheriff's Office will conduct a background check. Applicants must schedule and complete a fingerprint screening.

#### **5. Program Approval and Pass Issuance**

Upon approval, an AEAP identification card will be issued.

### ***Required Documents***

Applicants must submit the following documents with their application:

1. Notarized Attorney Expedited Access Program Application
2. Texas Driver's License
3. Texas Bar Card
4. Social Security Card

### **Application Submission**

Once the application is completed and notarized, it must be submitted to the Training and Recruiting Division of the Galveston County Sheriff's Office, located at:

**601 54th Street  
Galveston, Texas 77551**



# Galveston County Sheriff's Office

## ATTORNEY EXPEDITED ACCESS PROGRAM APPLICATION (AEAP)

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Last Name First Name Middle Name

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Date of Birth Race/ Sex State/DL Number State

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Social Security Number Birth/ Maiden Name (note: list all last names ever used)

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Street Address Apt. City State Zip Code

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Home Phone Cell Phone Personal e-mail

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Business Name Business E-mail Business Phone

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Business Address City State

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Business Point of Contact/ Supervisor Point of Contact e-mail

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Check the appropriate response to the questions below. If you answer YES to any of the questions, you **MUST** write an explanation next to the question. If you do not have enough space to completely answer the question, then attach a separate page to this form.

**UNTRUTHFUL RESPONSES WILL RESULT IN DENIAL OF APPLICATION**

Have you ever been arrested OR convicted OR suspected of a crime?  Yes  No

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Do you have any friends, associates or relatives incarcerated in the Galveston County Jail at this time?  
 Yes  No

Have you ever had personal visits or personal phone calls from any inmates in the Galveston County Jail within the last 3 years that were not in a professional/ legal capacity?  Yes  No

If so, who and how many times?

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**ATTENTION**  
THE STATEMENT BELOW MUST BE NOTARIZED

I, \_\_\_\_\_, hereby authorize any investigator or duly accredited representative of the Galveston County Sheriff's Office bearing this release to obtain any information from schools, residential management agents, employers, criminal justice agencies, or individuals, relating to my activities. This information may include, but is not limited to, academic, residential, achievement, performance, attendance, personal history, disciplinary, DPS fingerprint-based applicant clearinghouse, arrest, criminal history, and conviction records. I hereby direct you to release such information upon request of the bearer. I understand that the information released is for official use by the Galveston County Sheriff's Office and may be disclosed to such third parties as necessary in the fulfillment of official responsibilities.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Texas Bar Number**

State of Texas, County of Galveston

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/ she executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

AFFIX SEAL

\_\_\_\_\_  
Notary Public Signature