

# **Benton County Victim's Assistance Program**

**Ryan S. Joslin**  
District Attorney

**Crime Victim Assistance**

For information and assistance, please call  
(541) 766-6688

[VAP@co.benton.or.us](mailto:VAP@co.benton.or.us)

## **Practicum Job Description**

(11/15/2017)

Following is a list of duties and activities for the practicum student. As the needs of the District Attorney's Office and Victim Services changes, the specific duties of the practicum student may also vary from term to term. Practicum students will primarily provide administrative support to the advocates so they may provide direct services to crime victims.

**Opening Victim Files:** Once a case has been entered in to the DA Case Management System (PBK) and assigned a case number, Victim Services will "open" the file for all cases in which there are victims.

The process for opening a file begins with review of the police reports to determine what forms should be sent to the victim. The forms may include but are not limited to a number of different brochures, cover letter, Victim Impact Statement, restitution form, and Crime Victim's Compensation application. The forms are generated by PBK and are printed automatically.

**Notifying Victims of Events Pertinent:** Initial contact with victims is usually made by sending them a Victim Impact Statement and restitution form when a file is opened. As a case progresses, the practicum student will assist the Victim Assistance Program in notifying the victim of significant court events such as arraignment, entry of plea, continuance, sentencing, and restitution hearing.

**Completing Restitution Forms:** The practicum student will send the restitution form to the victim when a file is opened. The practicum will also copy and distribute the completed forms to the defense attorneys and juvenile department if appropriate. The practicum may also assist the restitution clerk in determining restitution amounts and preparing statements to submit to the court at the time of sentencing.

**Closing Cases:** When the prosecution of a case is completed and the file is closed by the front office support staff, the practicum will generate a disposition letter from PBK. The practicum will send the victim a letter that explains the outcome of the case together with a copy of the Sentencing Order, Benton County Customer Survey, Parole Notification form, and Sex Offender Registration information if appropriate.

**Attending Court Proceedings:** The practicum may ask to pursue areas of individual interest in the court process, if time allows. However, some time should be spent attending one or more of the following proceedings: arraignments, juvenile appearances, court and jury trials, and sentencings.

**Miscellaneous Activities:** Other activities available to the practicum during the term may include the following:

- Ride-a-long with police or probation officer
- Tour of the jail
- Review the Oregon Criminal or Evidence Code
- Read victimization materials in VAP library
- Learn to utilize PBK information
- Shadow other positions within the office



**EDUCATION:**

Indicate highest year in school completed \_\_\_\_\_

Major \_\_\_\_\_ Minor \_\_\_\_\_

If presently enrolled, indicate year in school \_\_\_\_\_

Name of school \_\_\_\_\_

**PRESENT OR MOST RECENT EMPLOYMENT:**

Length of present employment From \_\_\_\_\_ To \_\_\_\_\_

Position was Permanent \_\_\_\_\_ Temporary \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Name of Employer/Supervisor \_\_\_\_\_

Phone of Employer/Supervisor \_\_\_\_\_ May we contact? Yes \_\_\_\_\_

**CHARACTER REFERENCES:**

Provide name, address, and phone number for three local references (excluding relatives) indicating their relationship to you:

\_\_\_\_\_  
Name of Reference #1 Relationship to you

\_\_\_\_\_  
Street Address City, State, and zip code

\_\_\_\_\_  
Name of Reference #2 Relationship to you

\_\_\_\_\_  
Street Address City, State, and zip code

\_\_\_\_\_  
Name of Reference #3 Relationship to you

\_\_\_\_\_  
Street Address City, State, and zip code

**PRACTICUM STUDENT ONLY:** (Student receiving credit for internship are prioritized)

Sponsoring School \_\_\_\_\_ Department \_\_\_\_\_

Professor \_\_\_\_\_

Level/Year \_\_\_\_\_

Credit hours to be received \_\_\_\_\_ Number of Hours Available \_\_\_\_\_  
**(min. 20hrs/week)**

School Term to Complete Practicum: \_\_\_\_\_

Would you like to be considered for other  
terms? Yes No

**I hereby certify that there are no misrepresented or falsifications in the above statements  
and that the information provided is true to the best of my knowledge.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Please return or mail to the following address:**

**Benton County District Attorney  
Office Benton County Courthouse  
120 NW 4<sup>th</sup> Street  
Corvallis, OR 97330**

**Email Address: VAP@co.benton.or.us  
Phone Number: 541-766-6688**

**REQUEST FOR CRIMINAL HISTORY BACKGROUND CHECK**

I hereby authorize and request the Benton County District Attorney, the Corvallis Police Department, the Benton County Sheriff's Department, the Department of State Police and any Juvenile Department to conduct a criminal history investigation on me utilizing whatever information resources may be available to them, including but not limited to: L.E.D.S., N.C.I.C., D.M.V, and any local files.

I provide the following information to enable the above named agencies to conduct a full inquiry:

FULL NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

DRIVER'S LICENSE NO.: \_\_\_\_\_

STATES IN WHICH I HAVE RESIDED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date