

APPLICATION FOR APPOINTMENT LISTS

Instructions: All applicants for whom this is an original application must complete Section I, all relevant parts of Section II, and Section IV. Applicants who wish to supply supplemental information should complete Section III. Those seeking to reactivate their status on any appointment list after a brief hiatus should complete only the Name portion of Section I and sign Section V.

Check all boxes that apply.

I. APPLICANT

Name: _____
 (First) (Middle) (Last)

State Bar Number: _____

Firm or Employer: _____

Address: _____

Phone Number: _____

Fax Number: _____

Email address: _____

LICENSURE (required):

- I am licensed to practice law in the state of North Carolina.

OFFICE LOCATION (check one box below):

- I have an office in the county in which I am seeking appointment, *or*
- I have an office within the judicial district in a county adjacent to the one in which I am seeking appointment, *or*
- I do not have an office in the county of appointment or in an adjacent county within the judicial district, but I will be available to the court and to clients through these means:

II. LISTS

I am applying to have my name placed on the following appointment list(s) (*Complete appropriate section(s) below. If applying for a Criminal list, select the list that corresponds with your qualifications. Advancing to the next Criminal list is mandatory upon satisfaction of the requirements*):

- List 1: Misdemeanors and Misdemeanor Probation Violations
- List 2: All List 1 cases, Felony Probation Violations, and Felonies up to and including Class F
- List 3: All Misdemeanors and Felonies
- List 4: Juvenile Cases
- List 5: Special Proceedings Counsel
- List 6: Child Support Enforcement Actions
- List 7: Parent Representation

All court appointed counsel currently on a list as of the date of the adoption of these guidelines shall remain on that respective list (or lists).

LIST 1: MISDEMEANORS AND MISDEMEANOR PROBATION VIOLATIONS

ELIGIBILITY INFORMATION: See Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District (Cabarrus County):

COURT OBSERVATION AND TRAINING (*all required*):

- I observed one district court session in Cabarrus County on _____ (date), the Honorable _____ presiding.
- I observed one district court bench trial in Cabarrus County on _____ (date), the Honorable _____ presiding.
- I have attended at least three (3) hours of continuing legal education (“CLE”) in the area of criminal law within the past year (*specify date(s), program(s), and sponsor(s) below*):

LIST 2: ALL LIST 1 CASES, FELONY PROBATION VIOLATIONS, AND FELONIES UP TO AND INCLUDING CLASS F

ELIGIBILITY INFORMATION: See Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District (Cabarrus County):

LICENSURE (required):

- I have been licensed to practice law for at least two (2) years.

JURY TRIAL EXPERIENCE (check one box below):

- I have participated as trial counsel in at least two (2) jury trials that were brought to verdict, *or*
- I have completed at least twelve (12) hours of continuing legal education ("CLE") in the area of criminal jury trials (*specify date(s), program(s), and sponsor(s) below*):

LIST 3: ALL MISDEMEANORS AND FELONIES

ELIGIBILITY INFORMATION: See Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District (Cabarrus County):

LICENSURE (required):

- I have been licensed to practice law for at least five (5) years.

JURY TRIAL EXPERIENCE (required):

- I have participated as trial counsel in at least three (3) jury trials that were brought to verdict.

LIST 4: JUVENILE CASES

ELIGIBILITY INFORMATION: See Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District (Cabarrus County):

COURT OBSERVATION (*all required*):

- I have observed one juvenile delinquency court session in Cabarrus County on _____ (date), the Honorable _____ presiding.
- I have observed one juvenile delinquency hearing in Cabarrus County on _____ (date), the Honorable _____ presiding.

TRAINING (*check one box below*):

- I have attended at least three (3) hours of continuing legal education (“CLE”) in the area of juvenile delinquency law within the past year (*specify date(s), program(s), and sponsor(s) below*):

or

- I have been unable to meet the above CLE requirement for the following reasons:

LIST 5: SPECIAL PROCEEDINGS COUNSEL

ELIGIBILITY INFORMATION: See Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District (Cabarrus County):

COURT SESSION OBSERVATION (required):

- I have observed one special proceedings court session in Cabarrus County on _____ (date), the Honorable _____ presiding.

CONTESTED HEARING OBSERVATION (check one box below):

- I have observed one contested special proceedings hearing in Cabarrus County on _____ (date), the Honorable _____ presiding.

or

- I have been unable to meet the above contested hearing observation requirement for the following reasons:

TRAINING (check one box below):

- I have attended at least three (3) hours of continuing legal education (“CLE”) in the area of special proceedings law within the past two (2) years (*specify date(s), program(s), and sponsor(s) below*):

or

- I have been unable to meet the above CLE requirement for the following reasons:

LIST 6: CHILD SUPPORT ENFORCEMENT ACTIONS

ELIGIBILITY INFORMATION: See Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District (Cabarrus County):

COURT OBSERVATION (all required):

- I have observed one child support enforcement court session in Cabarrus County on _____ (date), the Honorable _____ presiding.
- I have observed one child support contempt hearing in Cabarrus County on _____ (date), the Honorable _____ presiding.

TRAINING (check one box below):

- I have attended at least three (3) hours of continuing legal education (“CLE”) in the area of child support enforcement law within the past two (2) years (*specify date(s), program(s), and sponsor(s) below*):

or

- I have been unable to meet the above CLE requirement for the following reasons:

LIST 7: PARENT REPRESENTATION

ELIGIBILITY INFORMATION: See Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District (Cabarrus County):

COURT OBSERVATION (*all required*):

- I have observed at least one court session in Cabarrus County in which abuse, neglect, dependency, or termination of parental rights cases were heard on _____ (date), the Honorable _____ presiding.
- I have observed at least one contested adjudicatory or termination hearing in Cabarrus County on _____ (date), the Honorable _____ presiding.

TRAINING (*check one box below*):

- I have attended at least three (3) hours of continuing legal education (“CLE”) in the area of parental rights law within the past two (2) years (specify date(s), program(s), and sponsor(s) below):

or

- I have been unable to meet the above CLE requirement for the following reasons:

III. ADDITIONAL INFORMATION

The Committee on Indigent Appointments may request you to provide additional information, including contacts who are familiar with your professional work.

If you are submitting materials in addition to the required certifications, please complete the following section:

ATTACHED SUBMISSIONS:

- I have attached the following additional material that may assist the Indigent Appointment Committee in evaluating my trial qualifications and experience:

IV. CERTIFICATION

I, the undersigned, certify that I have given true, accurate, and complete information on this application to the best of my knowledge. I authorize the Indigent Appointment Committee to investigate all information provided in this application and supporting submissions. I understand that false information, false documentation, or a failure to disclose relevant information may be grounds for rejection of my application.

I consent to a confidential inquiry by the Indigent Appointment Committee of the contacts listed in this application, if any, and others familiar with my competence, for the purpose of determining whether I fulfill the requirements to be placed on the roster of attorneys eligible for appointment for the lists on which I have requested placement. I further understand that all information received by the Indigent Appointment Committee in conjunction with this application, including reference information, shall be confidential and available for use only by the Indigent Appointment Committee and shall not be disclosed except as required by law. By submitting this application, I explicitly waive the right to review reference information obtained by the Committee on Indigent Appointments.

I have read the Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the ___ Judicial District (_____ County), and I agree to abide by the rules and conditions of appointment set forth there.

Signature of Applicant

Date

V. REACTIVATION OF APPOINTMENT STATUS

Instructions: Complete this section to resume active appointment status after a brief hiatus from accepting appointments for the lists to which you have previously applied and been approved. Do not complete this section if you are applying to have your name placed on additional lists for which you have not been previously approved.

CERTIFICATION

I, the undersigned, certify that the circumstances that I certified as true on my original Application for Appointment Lists continue to be true or have not changed substantially since the time of my application. I hereby notify the Committee on Indigent Appointments that I will again accept appointments for the lists to which I previously applied and was approved.

Signature of Applicant

Date