Judicial District 19A 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 V. 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 VI. Those who are certifying ongoing requirements for any list should complete only the Name portion of Section I, the relevant parts of Section IV, and Section V.*

*Those who are currently on a list for an area of law covered by a list in this application other than juvenile delinquency who are eligible to provide representation as of the effective date of the revised Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the Judicial District* *should complete only the Name portion of Section I, the relevant question at the beginning of each list for which continuation is sought, and Section V. Those on a current juvenile delinquency list who seek to be on List 4A should complete the Name portion of Section I, the statement regarding the IDS Orientation Packet and the Office of the Juvenile Defender resources under Orientation, and Section V. However, those on a current juvenile delinquency list who seek to be on List 4B must submit a new application, including Sections I, II List 4B, and V.*

*In lieu of completing this form, applicants may enter this information online as part of providing information on the Public Defense Portal, which will email a .pdf of the completed form to the applicant for submission to the Indigent Appointment Committee.*

**I. Applicant**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(First) (Middle) (Last)

State Bar Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Firm or Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Office Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Licensure (*required)*:

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

Availability *(required)*:

I have a confidential place in which to meet clients and will be available for meetings on a reasonable basis.

Describe: ­ ­­­­­­­­­­­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The telephone number listed above is active and has voice message capability and space for messages.

* The email address listed above is valid.

I will be available to the courts for scheduled court appearances.

II. Lists

I am applying to have my name placed on the following appointment list(s) *(complete appropriate section(s) below)*:

List 1: Misdemeanor Cases and Misdemeanor Probation Violations

List 2: Felonies F through I and Felony Probation Violations

* List 3: Felonies A to E
* List 4A: Juvenile Class A1-3 Misdemeanors, Class H-I Felonies, Probation Violations, and Motions for Contempt
* List 4B: Juvenile Class A-G Felonies
* List 5A: Guardianship and Disabled Adults
* List 5B: Judicial Waiver
* List 5C: Civil Commitment
* List 6: Child Support Enforcement Actions
* List 7: Parent Representation

List 1: Misdemeanor Cases 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.

Continuation on List *(required)*:

* I am currently on the list for this area of law and wish to continue on this list, and I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 1.

New Application:

Orientation *(required)*:

* I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 1.

Experience *(select all that apply)*:

* I have been licensed to practice for less than one (1) year and understand that I may be required to participate in a mentorship program.
* I have conducted a jury trial as first or second chair.

*or*

* I have not conducted a jury trial as first or second chair, and I understand that I may be required to have a second chair on my first jury trial.

Court Observation and Training *(all required)*:

I observed one district court session in \_\_\_\_\_\_\_\_\_\_\_ County on \_\_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding.

I observed one district court bench trial in \_\_\_\_\_\_\_\_\_ 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: Felonies F through I and Felony Probation Violations

**Eligibility Information:**  *See* Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District.

Continuation on List *(required)*:

* I am currently on the list for this area of law and wish to continue on this list, and have read the portion of the Indigent Appointment List Orientation Packet relevant to List 2.

New Application:

Licensure *(required)*:

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

Orientation *(required)*:

* I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 2.

Jury Trial Experience *(select all that apply)*:

I have participated as trial counsel in at least two (2) jury trials that were brought to verdict.

*or*

I have not participated as trial counsel in at least two (2) jury trials that were brought to verdict, but 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*):

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

*and*

* I have not participated as trial counsel in at least two (2) jury trials that were brought to verdict, but I have served as second chair on a jury trial.

*or*

* I have not participated as trial counsel in at least two (2) jury trials that were brought to verdict or served as second chair on a jury trial, and I understand that I may be required to have a second chair on my first jury trial.

List 3: Felonies A to E

**Eligibility Information:**  *See* Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District.

Continuation on List *(required)*:

* I am currently on the list for this area of law and wish to continue on this list, and I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 3.

New Application:

Orientation *(required)*:

* I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 3.

Licensure and Experience *(required)*:

* I have been licensed to practice law and have recently practiced adult criminal law on a consistent basis for at least three (3) years.

Jury Trial Experience *(select all that apply)*:

I have participated as trial counsel in at least three (3) jury trials that were brought to verdict, and I have participated as trial counsel in a case involving a charge covered by List 3.

*or*

I have participated as trial counsel in at least three (3) jury trials that were brought to verdict but have not participated as trial counsel in a case involving a charge covered by List 3, and I understand that I may be required to have a second chair on my first jury trial of such a charge.

Ongoing Requirements:

Training (required):

* I understand that to remain on List 3, I will be required every three (3) years to attend at least nine (9) hours of CLE relevant to representation of high-level felonies and to certify the same.

List 4A: Juvenile Class A1-3 Misdemeanors, Class H-I Felonies, Probation Violations, and Motions for Contempt

**Eligibility Information:**  *See* Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District.

Continuation on List *(required)*:

* I am currently on the list for this area of law and wish to continue on this list, and I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 4A and have become familiar with the Office of the Juvenile Defender by visiting the website and subscribing to the blog and listserv.

New Application:

Orientation *(all required)*:

* I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 4A.
* I have read and am familiar with the Juvenile Code and the local rules governing juvenile court in the county or judicial district.
* I have spent at least one (1) hour becoming familiar with the practices and procedures of the court counselor office in the county or district and have met with the Chief Court Counselor on \_\_\_\_\_\_\_\_\_\_\_ (date).
* I have become familiar with the Office of the Juvenile Defender by visiting the website and subscribing to the blog and listserv.
* I have shadowed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (attorney name), an attorney currently on List 4A, for two (2) court sessions on \_\_\_\_\_\_\_\_\_\_\_ (date) and \_\_\_\_\_\_\_\_\_\_\_ (date).

Ongoing Requirements:

Orientation *(required)*:

* I understand that to remain on List 4A, within my first year of practice on this list I must confer with the director of the nearest juvenile detention facility, or the director’s designee, in person or by telephone and become familiar with detention center policies and procedures.

Training *(required)*:

* I understand that to remain on List 4A, within my first two years of practice on this list I will be required to complete at least six (6) hours of approved juvenile delinquency training, preferably with three (3) hours in the first year, and must thereafter complete at least three (3) hours of approved juvenile delinquency training or other comparable training every two (2) years and to certify the same.

List 4B: Juvenile Class A-G Felonies

**Eligibility Information:**  *See* Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District.

New Application:

Licensure and Experience *(all required)*:

* I have recently practiced in juvenile delinquency or adult criminal court on a consistent basis for at least three (3) years.
* I have successfully completed all of the requirements of List 4A.

Ongoing Requirements:

Training *(required)*:

* I understand that to remain on List 4B, I will be required to complete at least three (3) hours of approved juvenile delinquency training or other comparable training every two (2) years and to certify the same.

List 5A: Guardianship and Disabled Adults

**Eligibility Information:**  *See* Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District.

Continuation on List *(required)*:

* I am currently on the list for this area of law and wish to continue on this list, and I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 5A.

New Application:

Orientation *(all required):*

* I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 5A.
* I have read and am familiar with the law relevant to guardianship and disabled adult proceedings, including N.C.G.S. Chapters 35A and 108.

Court Observation *(check all that apply)*:

I have observed at least three (3) guardianship proceedings (preferably one (1) each of contested guardianship, restoration, and Chapter 108 proceedings) in \_\_\_\_\_\_\_\_\_ County on \_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding; \_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding; and \_\_\_\_\_\_\_\_\_\_\_ (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 relevant law within the past two (2) years (*specify date(s), program(s), and sponsor(s) below*):

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

*or*

Such training was not reasonably available.

List 5B: Judicial Waiver

**Eligibility Information:**  *See* Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District.

Continuation on List *(required)*:

* I am currently on the list for this area of law and wish to continue on this list and I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 5B.

New Application:

Orientation *(all required):*

* I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 5B.
* I have read and am familiar with the law relevant to judicial waiver, including N.C.G.S. § 90-21.6 through 21.10.

List 5C: Civil Commitment

**Eligibility Information:**  *See* Regulations for Appointment of Counsel in Cases under the Indigent Defense Services Act for the 19A Judicial District.

Continuation on List *(required)*:

* I am currently on the list for this area of law and wish to continue on this list, and I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 5C.

New Application:

Orientation *(all required):*

* I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 5C.
* I have read and am familiar with the law relevant to civil commitment, including N.C.G.S. Chapter 122C.

Court Observation *(check all that apply)*:

I have observed at least three (3) civil commitment hearings (preferably one (1) each of a civil commitment hearing involving an adult, a voluntary or involuntary commitment hearing involving a minor, and a hearing involving an incompetent adult being admitted by a guardian) in \_\_\_\_\_\_\_\_\_ County on \_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding; \_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding; and \_\_\_\_\_\_\_\_\_\_\_ (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 civil commitment law within the past two (2) years (specify date(s), program(s), and sponsor(s) below):

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

*or*

* Such training was not reasonably available.

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.

Continuation on List *(required)*:

* I am currently on the list for this area of law and wish to continue on this list and I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 6.

New Application:

Orientation *(all required):*

* I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 6.
* I have read and am familiar with the law relevant to child support enforcement, including N.C.G.S. Chapters 5, 50, and 110.

Court Observation *(all required)*:

I have observed at least one (1) child support enforcement court session in \_\_\_\_\_\_\_\_\_\_ County on \_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding.

I have observed at least one (1) child support contempt hearing in \_\_\_\_\_\_\_\_\_\_ 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*

Such training was not reasonably available.

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.

Continuation on List *(required)*:

* I am currently on the list for this area of law and wish to continue on this list, and I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 7.

New Application:

Orientation *(all required):*

* I have read the portion of the Indigent Appointment List Orientation Packet relevant to List 7.
* I have read and am familiar with N.C.G.S. §§ 7B-100 through 7B-1112 and any local rules governing abuse, neglect, and dependency court

Court Observation *(check all that apply)*:

I have observed a non-secure custody hearing in \_\_\_\_\_\_\_\_\_ County on \_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding.

I have observed a contested adjudicatory or disposition hearing in \_\_\_\_\_\_\_\_\_ County on \_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding.

* I have observed a review hearing in \_\_\_\_\_\_\_\_\_ County on \_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding.
* I have observed a permanency planning hearing in \_\_\_\_\_\_\_\_\_ County on \_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding.

*and*

* I have observed a contested termination of parental rights hearing in \_\_\_\_\_\_\_\_\_ County on \_\_\_\_\_\_\_\_\_\_\_ (date), the Honorable \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presiding.

*or*

* Observation of a contested termination of parental rights hearing was not possible.

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*

Such training was not reasonably available.

Ongoing Requirements:

Training *(required)*:

* I understand that to remain on List 7, I will be required to complete at least three (3) hours of CLE relevant to representation of parents in abuse, neglect, dependency and termination of parental rights every two (2) years and to certify the same.

1. 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, including relevant law school clinical or other skill-building experience as an alternative for any list that requires a number of years of required practice as a qualification:

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

1. **Ongoing Requirements**

I have met the ongoing requirements for the following appointment list(s) *(complete appropriate section(s) below)*:

List 3: Felonies A to E

Training *(required every three (3) years of practice on list)*:

* I have attended at least nine (9) hours of CLE relevant to representation of high-level felonies within the past three (3) years (specify date(s), program(s), and sponsor(s) below):

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

List 4A: Juvenile Class A1-3 Misdemeanors, Class H-I Felonies, Probation Violations, and Motions for Contempt

Orientation *(required during first the first year of practice on list)*:

* I have conferred with the director of the nearest juvenile detention facility, or the director’s designee, in person or by telephone and become familiar with detention center policies and procedures on \_\_\_\_\_\_\_\_\_\_\_ (date).

Training *(required every two (2) years of practice on list)*:

* I have completed at least six (6) hours of approved juvenile delinquency training or other comparable training within the past two (2) years (specify date(s), program(s), and sponsor(s) below):

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

List 4B: Juvenile Class A-G Felonies

Training *(required every two (2) years of practice on list)*:

* I have completed at least three (3) hours of approved juvenile delinquency training or other comparable training within the past two (2) years (specify date(s), program(s), and sponsor(s) below):

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

List 7: Parent Representation

Training *(required every two (2) years of practice on list)*:

* I have completed at least three (3) hours of CLE relevant to representation of parents in abuse, neglect, dependency and termination of parental rights within the past two (2) years (specify date(s), program(s), and sponsor(s) below):

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

1. 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 19A Judicial District, and I agree to abide by the rules and conditions of appointment set forth there.

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Signature of Applicant Date

1. 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.

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Signature of Applicant Date