# UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA

## APPLICATION FOR MEMBERSHIP ON CJA TRIAL ATTORNEY PANEL

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-				TO:	PRESENT	
SI	TREET ADDRESS		SUITE			
CI	TTY	STATE	ZIP CODE	BUSINES	S TELEPHONE	EXTENS
BU	USINESS EMAIL ADDRESS			BUSINES	S FAX	
Application for	or Western I	Division District Cou	rt Panel			
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	Southern	Division District Cou	ırt Panel			
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	TO THE NEEDS O					
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Colleges a	and Universities Attended:			
	NAME	DATES (MM/Y	Y - MM/YY)	DEGREE
	NAME	DATES (MM/Y	Y - MM/YY)	DEGREE
	NAME	DATES (MM/Y	Y - MM/YY)	DEGREE
Law Schoo	ol(s):			
	NAME	DATES (MM/Y	Y - MM/YY)	DEGREE
	NAME	DATES (MM/Y	Y - MM/YY)	DEGREE
Profession	nal Work History (use additional pages if necessary)	:		
(a)	POSITION			
	NAME OF FIRM			
	STREET ADDRESS	S	SUITE S	TART DATE
	CITY	TATE ZII	P CODE F	END DATE
(b)	POSITION			
	NAME OF FIRM			
	STREET ADDRESS	S	SUITE S	TART DATE
	CITY	TATE ZII	P CODE E	END DATE
(c)	POSITION			
	NAME OF FIRM			
	STREET ADDRESS	S	SUITE S	TART DATE
	CITY	TATE ZII	P CODE F	END DATE

	Explain any periods during which you did not practice law starting from when you passed the bar to present.
	What is the general nature of your practice? DESCRIBE YOUR TYPICAL CLIENTS AND MENTION ANY LEGAL SPECIALTIES YOUR POSSESS.
	Check all that apply:
	☐ I have practiced primarily criminal law in federal court for at least five years.
	☐ I have been employed for the last three years in the criminal division of the USAO or FPDO.
	☐ I have had primary responsibility as counsel of record in at least 40 criminal cases (state or federal), including serving as
	second chair in at least two federal felony trials, and have chaired or second-chaired at least four sentencing hearings where the USSG applied.
1	IF YOU HAVE NOT CHECKED ONE OF THE ABOVE, EXPLAIN YOUR RELEVENT QUALIFICATIONS AND EXPERIENCES AND HOW THOSE WILL BE TRANSFERABLE T FEDERAL FELONY PRACTICE IN THE CENTRAL DISTRICT OF CALIFORNIA. (YOU MAY INCLUDE CIVIL LITIGATION EXPERIENCE, SUCH AS TRIALS, CONTESTE HEARINGS, DEPOSITIONS, ETC.)

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Summarize vo	ur experience with the federal senter	ncing guidelines		
INCLUDE SEMINA	_		TERS YOU HAVE HANDLED. PROVIDE THE TYPE OF	? INFC
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and reputa				references who are familiar with your profession ations to handle the rigors of federal felony trial
(a)				
	NAME			
	BUSINESS ADDRESS			BUSINESS TELEPHONE NUMBER
	CITY	STATE	ZIP CODE	OTHER NUMBER (HOME, CELLULAR, ETC.)
( <b>l</b> -)				
(b)	NAME			
	BUSINESS ADDRESS			BUSINESS TELEPHONE NUMBER
	CITY	STATE	ZIP CODE	OTHER NUMBER (HOME, CELLULAR, ETC.)
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	warus, nonors, and recogn	——————————————————————————————————————		tense that you have received.

pplicant.)	
(a)	Have you ever been arrested for, charged with, convicted of, or pleaded guilty or no contest to, the commission of any felony or misdemeanor? Unless your answer is an unqualified "no," state the complete facts and disposition, including the date, name and nature of the offense, and locality, and identify the authority in possession of the relevant records. For matters in which you were treated as a juvenile, you need only disclose convictions, adjudications, or other adverse determinations, including those resulting from no contest pleas or their equivalent.
	Yes No
(b)	Have you ever been removed from or voluntarily resigned from any indigent defense panel (or removed from eligibility to receive appointments by any state, county, federal district or circuit court) other than for reasons of relocation or rotation as part of the panel's regular procedures? If so, describe the grounds given, if any, for the removal, and the reasons for the resignation. Personal, family, or health reasons need not be described in detail.
	☐ Yes ☐ No
(c)	As the holder of any public office or of any license granted by the United States, or by any state or local government (including the California State Bar), have you ever - to your knowledge - been discharged, disbarred, suspended, or otherwise disqualified, disciplined, or advised that renewal of such license would not be permitted? Have you ever - to your knowledge - been disciplined by any such body, or are you now the subject of a formal or informal investigation concerning the same? Unless your answer to both of the preceding questions is an unqualified "no," state the complete facts and disposition and identify the authority in possession of the relevant records.
	Yes No
(d)	Have you ever been cited for contempt of any court or body having the power of contempt? If so, provide complete details.
	Yes No
(e)	Has your professional conduct or your professional ethics (including billing practices) ever been the subject of any written inquiry by any court, administrative agency, or bar association? Unless your answer to the preceding question is an unqualified "no," state the complete facts and disposition, including the date, identity of the court, administrative agency, or bar association, and identify the authority in possession of the records.
	Yes No
(f)	Have you ever been admonished or sanctioned by any court or agency? If so, provide complete details.
( )	Yes No
(g)	Have you ever been relieved as counsel of record, whether by request or otherwise, on any case in which you were appointed to represent a party in state or federal court? Do not include instances involving substitution by retained counsel, or where the motion to be relieved was based on the existence of a conflict of interest relating to another representation. For all other motion to be relieved, provide complete details of the grounds for the motion, and <b>all</b> of the following: case name, case number, name of the party whom you represented, court, name and telephone number of judge before whom the motion was brought, and name and telephone number of opposing counsel. For motions to be relieved for personal, family, or health reasons, the grounds need not be described in detail.
	Yes No

Use the provided attachment pages to explain any "YES" answers to the following questions. Provide all responsive information

known to you. Answers should not reveal privileged or confidential client information. ("Yes" answers do not necessarily disqualify an

14.

Provide three writing samples. Preferably, the samples should be from sentencing positions, pretrial motions, post-trial nortics, or issue briefs, and issue briefs, or issue briefs, and issue briefs, or issue briefs. All writing submitted must be your own individual work. If you were not the sole counsel on must accurately relate your role in the preparation of the writing.  ATTACH THE THREE WRITING SAMPLES TO YOUR APPLICATION.  If accepted to the panel, you are expected to attend the mandatory orientation session and begin panel service starting the following calendar year. If you are not able to begin panel service in January, please explain.	ing prov With thassistanave provented
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I certify that I am a member of the Court of Appeals for the Ninth Circuit (or that my application for membership is pending). I understand that I must remain in good standing with that court at all times if I am appointed to the district court panel. I understand that, if appointed, I will be required to cover duty days, to handle appointed matters from initial appearance through conclusion, and to accept a minimum of four appointments per year.

If appointed, I will notify the CJA Supervising Attorney in writing of the following within seven days: (1) any phone number, fax, address, or email address change; (2) any new information responsive to question numbers 14 and 15 of this application. I accept that failure to comply with orders, rules, regulations, policies, and procedures administered by the Court may lead to disciplinary action, including removal from the panel. I understand appointment to the panel is at the pleasure of the Court and subject to termination at any time. I further understand that appointment to the panel may be reviewed at any time and will be reviewed at the conclusion of the panel term.

I certify that I have read and am familiar with the Federal Rules of Civil Procedure, the Local Criminal Rules, the relevant portions of the Federal Rules of Civil Procedure and Local Civil Rules, and the ethical and other requirements of the State Bar of California and California law relating to the representation of criminal defendants, as well as the Guide to Judiciary Policy, Vol. 7A. If I should be appointed to the CJA Trial Attorney Panel, I will comply with all Court orders, rules, and regulations. I release and agree to hold harmless my present and former employers and all persons or entities concerning, without limitation, any and all statements made about me or information provided about me to the CJA Committee or its representatives. I understand that failure to provide true and correct information in answer to any of the questions on this form will be grounds for denial of panel membership or removal from service on the panel at any time.

declare under penalty of perjury under the laws	s of the United States that the foregoing is true and correct.
DATE	SIGNATURE OF APPLICANT

Submit completed application to CJA Department at: Cja@cacd.uscourts.gov

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

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## Central District of California Criminal Justice Act Trial Attorney Panel Application

### PROFESSIONAL EXPERIENCE INQUIRY AUTHORIZATION AND WAIVER FORM

I authorize the administrators of the disciplinary and inquiry bodies of any court, bar, or other association to disclose to the Criminal Justice Act Committee, or its designees, including the Criminal Justice Act Trial Attorney Panel Advisory Committee of the Central District of California all information contained in the files of such bodies concerning my present professional status, all complaints that have been made against me, and the disposition thereof, and any other information related to my application for the Criminal Justice Act Trial Attorney Panel for the Central District of California. I expressly waive whatever right I may have to confidentiality of the foregoing information.

I also authorize the custodian Panel for the Central District of Californ Criminal Justice Act Committee, or its d	nia to permit the examinatior	n or receipt of such records or in	, , , , , ,
PRINT OR TYPE N.	AME	SIGNATURE OF APPLICANT	

DATE SIGNED

#### Central District of California Criminal Justice Act Trial Attorney Panel Application

#### ACKNOWLEDGMENT FORM

I understand that attorneys are selected to serve on the panel at the pleasure of the Court to represent indigent defendants, that this application only provides information for the use of the Criminal Justice Act Committee, by delegation from the Court, to select members of the panel and does not create entitlement for participation on the panel or appointment to cases, and that panel attorneys are subject to removal by the Criminal Justice Act Committee.

I understand and agree that representation of an indigent client upon appointment by the Court is a professional privilege and duty and that even if I am placed on the panel, I have no right to be appointed to represent any indigent client.

I certify that I have read and understand the above	e and agree to it.
DATE SIGNED	SIGNATURE OF APPLICANT