



**SUPERIOR COURT OF CALIFORNIA
COUNTY OF EL DORADO**

Invites Applications for the Contract Position of

Court Appointed Attorney, Juvenile Dependency
Placerville and/or Lake Tahoe

Final Filing Date: Ongoing

The Superior Court of California, County of El Dorado is recruiting for conflict [Court Appointed Attorneys for Juvenile Dependency](#) proceedings. Cases are available in Placerville and/or South Lake Tahoe. This is an outstanding opportunity to work and support at-risk children and families in El Dorado County, gain significant in-court experience, and be paid consistently based on caseload.

Minimum Qualifications

All attorneys appearing in juvenile dependency proceedings must meet minimum standards of competence as set forth in California Rules of Court, rule 5.660, which includes membership in the State Bar of California, at least 8 hours of training or education on juvenile dependency law, and at least 6 months of demonstrated competence representing clients in juvenile dependency proceedings.

Compensation

Conflict Court Appointed Juvenile Dependency Attorneys are paid an annual flat fee rate for El Dorado of **\$624 per active client per year, or \$52 per month**. These are appointed positions reviewed and approved by the Presiding Judge and assigned cases at the discretion of the judicial officer in the department. Dependency hearings are typically held in Placerville, Dept. 8, and South Lake Tahoe, Dept. 12.

- Conflict/hourly attorneys will receive a flat rate per client of \$624 per active client per year, or \$52.00 per month.

How to Apply

Candidates must fully complete and submit the attached *Court Appointed Attorney Application and Agreement* form. A cover letter and resume of professional qualifications and experience, emphasizing experience in juvenile dependency, is also recommended, but optional. Send completed applications via e-mail or mail to:

Suzanne M. Thurman, Court Administration
sthurman@eldoradocourt.org
El Dorado County Superior Court
2850 Fairlane Court, Suite 110
Placerville, CA 95667

SUPERIOR COURT OF CALIFORNIA COUNTY OF EL DORADO

Court Appointed Attorney Application and Agreement

Return completed application to:

Suzanne M. Thurman, Court Administration
sthurman@eldoradocourt.org
 El Dorado County Superior Court
 2850 Fairlane Court, Suite 110
 Placerville, CA 95667

OFFICIAL USE ONLY:		
	<i>Judge's signature and date approved</i>	
Date Received: _____	JV 300 (Minors)	Probate/conservatorship
Sent for Review: _____	JV 300 (Adults)	Criminal (misd.)
Approved as submitted	JV 602	Criminal (felony)
Denied as submitted	Fam. Law DCSS	Guardianship
Conditionally approved: _____	Fam. Law minors	_____
		<i>Other</i>

1. Contact Information

- a. Name: _____ b. California SBN: _____
- c. Business address: _____
 City: _____ State: _____ Zip: _____
 Mailing address (if different): _____
 City: _____ State: _____ Zip: _____
- d. E-mail: _____
- e. Phone: Daytime: _____ Cell: _____ Fax: _____

2. Geographical Location of Service

- a. I am willing to serve at the following court locations:

West slope (Placerville, Cameron Park)

South Lake Tahoe.

- b. I am **not** available to serve as follows (*describe and explain*):
- _____
- _____

3. Appointment requests/Areas of interest

- a. I am willing to serve as a court-appointed attorney in the following types of cases (*choose all that apply*):

Juvenile dependency (300), minors

Probate/conservatorship

Juvenile dependency (300) parents/adults

Guardianship

Juvenile delinquency (602)

Criminal cases, misdemeanor

Family law, DCSS

Criminal cases, felony

Family law, minor's counsel

Other

4. Professional and Personal Qualifications

- a. Date of admission to the State Bar of California: _____ Years of active membership: _____
- b. I am also admitted to practice law in the states listed below:
- State: _____ Date admitted: _____ Bar No: _____ Years of active membership: _____
- State: _____ Date admitted: _____ Bar No: _____ Years of active membership: _____
- c. Are you in good standing in each state where you are licensed to practice law? Yes No
(If no, provide an explanation below or in an attachment.)
- _____
- _____

Your name: _____

State Bar Number: _____

(4. Professional and Personal Qualifications Continued)

d. I am certified as a specialist by the State Bar of California Board of Legal Specialization or by an organization whose certification program has been accredited by the State Bar of California.
Area(s) of specialization:

e. I am certified as a legal specialist by other states or organizations as follows (*specify*):

Area(s) of specialization:

f. Have you ever been disciplined by the State Bar of California or by a bar association or other professional licensing entity in any state or by a court of record, including being sanctioned or held in contempt? Yes No

g. Do you have any disciplinary action pending against you by the State Bar of California or by a bar association or other professional licensing agency in any state or by a court of record, including any proceeding for the imposition of sanctions or for contempt? Yes No

h. Have you ever been convicted or pleaded no contest to a felony or misdemeanor? Yes No

i. Are you a defendant in any pending felony or misdemeanor proceeding? Yes No

j. Have you ever been a party to any legal proceeding? Yes No

(If you answered yes to questions 4f, g, h, i, or j, provide additional information below or in an attachment.)

5. Practical Experience

a. The principal portion of my law practice in California is in the following courts (*specify state and federal courts, including trial and appellate courts, if applicable*):

b. I currently practice in the following areas of law (list each subject area of law that occupies at least 10 percent of your time):

6. Training

Local Rules and California Rules of Court require that you have substantive training and experience for the case type(s) for which you desire appointment. (Please see California Rules of Court, rules 5.240-5.242 for family law appointment requirements, rule 7.1101 guardianship/conservatorship appointment requirements, and rule 4.117 appointment requirements for trial counsel in capital cases.) Please attach all documentation and provide all information related to your training and experience as required.

Your name: _____

State Bar Number: _____

(6. *Description of Training*)

Continued)

7. References

List at least three attorneys and two or more judicial officers who are familiar with your work:

8. Liability Insurance

In order to be considered for inclusion on the juvenile dependency alternate Court Appointed Attorney panel, you must submit proof of professional liability insurance in the amount of \$100,000 per case and \$300,000 aggregate. (*Attach*)

CERTIFICATION

I understand and acknowledge that the selection and appointment of a court appointed attorney is solely at the discretion of the court. I hereby certify that all statements made in this entire application, including attachments, are true and complete to the best of my knowledge. I understand that any false, incomplete, or incorrect statement, regardless of when it is discovered, may result in my disqualification or dismissal as Court Appointed Counsel.

Date: _____

TYPE OR PRINT NAME	SBN	SIGNATURE OF APPLICANT

(This application is not complete unless the Waiver and Authorization for Release of Information is signed by the applicant.)

WAIVER AND AUTHORIZATION FOR RELEASE OF INFORMATION

I have applied to be appointed as a Court Appointed Attorney in the Superior Court of California, County of El Dorado. I hereby authorize the State Bar of California and the attorney-licensing authority in any other state where I am admitted to practice law to release to an authorized representative of the court information regarding the following matters:

(1) whether I am in good standing or am otherwise authorized to practice law as a member of the State Bar of California or as an attorney in any other state where I am admitted to practice law; (2) whether I have a record of discipline with the State Bar of California or with the licensing authority for attorneys in any other state where I am admitted to practice law; and (3) whether any disciplinary investigation or proceeding is pending against me by the State Bar of California or by the licensing authority for attorneys in any other state where I am admitted to practice law.

Date: _____

TYPE OR PRINT NAME	SBN	SIGNATURE OF APPLICANT

SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF EL DORADO

ATTORNEY INFORMATION NAME _____ SBN _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ EMAIL _____ PHONE _____ FAX _____	<i>For Court Use Only</i>
<p style="text-align: center;">SUPERIOR COURT OF CALIFORNIA, COUNTY OF EL DORADO</p> Placerville Department 8 South Lake Tahoe 295 Fair Lane 1354 Johnson Blvd. Placerville, CA 95667 South Lake Tahoe, CA 96150	
CERTIFICATE OF COMPETENCY TO PRACTICE IN JUVENILE DEPENDENCY COURT	<i>Copy to Court Administration</i>

I _____, Attorney at Law, licensed to practice in the State of California, hereby certify that I meet the minimum standards for practice before a juvenile court set forth in California Rules of Court and El Dorado County Local Rules, completing at least eight hours of training or education in the minimum requirements for training, education and experience as set forth below:

Eight hours (minimum) of training or education in juvenile dependency law or related subjects as set forth in California Rules of Court.

Course Title(s): _____
(Attach copies of MCLE certificates or other attendance documentation)

Six months of recent regular appearances in dependency proceedings

Court Location(s): _____
(List of counties in which you have appeared as counsel in dependency)

I have reviewed County of El Dorado Superior Court’s Local Rules regarding juvenile matters, and California Rules of Court pertaining to Competent Counsel requirements and understand the requirements for appointments in juvenile matters. I understand I need to complete at least eight hours of substantive continuing education and submit a new certificate of competency to the Court within three years.

I declare under penalty of perjury of the laws of the State of California that the foregoing is true and correct and that this Certificate of Competency was executed on _____
Date

Attorney signature

State Bar Number