



THE BAR ASSOCIATION OF  
SAN FRANCISCO

**Lawyer Referral and Information Service**

201 Mission Street, Fourth Floor

San Francisco, CA 94105

Telephone: (415) 477-2374

Fax: (415) 477-2389

URL: <http://www.sfbar.org>

**APPLICATION FOR  
JUVENILE DEPENDENCY LAW PANEL**

Name: \_\_\_\_\_ State Bar number: \_\_\_\_\_

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

E-mail address: \_\_\_\_\_

Full time SF office address: \_\_\_\_\_

Mailing address (if different): \_\_\_\_\_

Number of years of continuous active practice in California: \_\_\_\_\_

Number of years of continues active practice in Juvenile Dependency Court: \_\_\_\_\_

County of Juvenile Dependency Court: \_\_\_\_\_

Are you a certified Child Welfare Law specialist? Certification expiration date: \_\_\_\_\_

**Substantial Equivalent Experience.**

**If you cannot meet the following requirements for panel membership, but believe that you qualify by reason of substantial, equivalent experience, you may submit an outline of such experience, as provided for in Rule 6 of the Lawyer Referral and Information Service Rules, as a supplement to this application. However, applicants must complete as much of this application as possible, supplementing by letter, with the substantial equivalent experience.**

**I. JUVENILE DEPENDENCY COURT APPOINTMENT PANEL – General Requirements**

In order to be eligible for appointments from the Juvenile Dependency Court, an attorney must be a member of the Juvenile Dependency Law Panel and agree to the following:

- A. Agree to and comply with the Lawyer Referral and Information Service Attorney Application & Agreement;
- B. To appear in court on the assigned date and time;
- C. To accept, as sole compensation, the monies awarded by the court;
- D. Maintain full time office in San Francisco listed on all web pages, pleadings, business cards and stationary; and the areas of practice for which you have been approved to participate in the LRIS shall be listed on your website as well.
- E. Applicant must provide verification that during the year prior to submitting this application; applicant attended at least **fifteen (15)** units of Continuing Legal Education approved for credit by the State Bar of California relating directly to representation of minors and parents in Dependency

Proceedings. **This is a continuing annual obligation and complies with the State Bar Guidelines on the Delivery of Services in Indigent Defense.** Five of the 15 required units may be completed through self-study.

Please list any other court appointed panels to which you belong:

\_\_\_\_\_

I, the undersigned, have read the foregoing conditions for membership to the Juvenile Dependency Law Court Appointment subpanel and agree to be bound by them.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**II. QUALIFICATIONS AND REQUIREMENTS**

**Class 1 - Representing Parents and Guardians - W & I Code §300**

In order to be referred/appointed to represent Parents or Guardians, applicant must have handled as attorney of record **ten** W & I §300 proceedings within the last **three** years - **three** of which must have been contested hearings in which non-family witnesses were examined or cross examined. Jurisdictional, Dispositional, Dependency Status Renewal, or Permanency Planning Hearings qualify as contested hearings.

<u>Case name</u>	<u>Case Number</u>	<u>Jurisdiction and Name of Judge</u>	<u>Date(s)/Type of Contested Hearings</u>	<u>Inclusive Dates of representation</u>
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____

**San Francisco Local Practice Checklist Requirements – Class 1 (New Applicants Only)**

- Participate in Detention Hearing      Date completed: \_\_\_\_\_      Case name/number: \_\_\_\_\_      Judge/Commissioner \_\_\_\_\_
- Conduct a Contested Hearing      Date completed: \_\_\_\_\_      Case name/number: \_\_\_\_\_      Judge/Commissioner \_\_\_\_\_

I hereby certify that during the preceding year, I have attended at least 15 units of Continuing Legal Education approved for credit by the State Bar of California relating directly to representation of Parents and Minors in dependency proceedings (5 of these units may be satisfied through self-study, the remaining 10 units must be “participatory”); (Please include attachment if more space is needed):

	<b>Title of Training</b>	<b>Date(s) of training</b>	<b>Number of Hours</b>	<b>Provider</b>	<b>Self-Study (S) Participate (P)</b>
1.					
2.					
3.					
4.					
5.					

**I hereby declare under penalty of perjury that all of the information in this application is true and correct and that I had full responsibility for all cases listed in the application, or if not, I have attached an explanation.**

Date: \_\_\_\_\_      Signature: \_\_\_\_\_

**Class 2 - Representing Children- W & I Code §300**

In order to be referred/appointed to represent a minor child, applicant must be/have been qualified to represent parents (Class 1) AND within the last **three** years, applicant must have represented as attorney of record a minor child in **ten** (10) W & I §300 proceedings - **three** of which must have been contested hearings in which non-family witnesses were examined or cross examined. Jurisdictional, Dispositional, Dependency Status Renewal, or Permanency Planning Hearings qualify as contested hearings.

<u>Case name</u>	<u>Case Number</u>	<u>Jurisdiction and Name of Judge</u>	<u>Date(s)/Type of Contested Hearings</u>	<u>Inclusive Dates of representation</u>
11. _____	_____	_____	_____	_____
12. _____	_____	_____	_____	_____
13. _____	_____	_____	_____	_____
14. _____	_____	_____	_____	_____
15. _____	_____	_____	_____	_____
16. _____	_____	_____	_____	_____
17. _____	_____	_____	_____	_____
18. _____	_____	_____	_____	_____
19. _____	_____	_____	_____	_____
20. _____	_____	_____	_____	_____

**San Francisco Local Practice Checklist Requirements – Class 2 (New Applicants Only)**

- Participate in Detention Hearing      Date completed: \_\_\_\_\_      Case name/number: \_\_\_\_\_      Judge/Commissioner \_\_\_\_\_
- Conduct a Contested Hearing      Date completed: \_\_\_\_\_      Case name/number: \_\_\_\_\_      Judge/Commissioner \_\_\_\_\_
- Conduct a Meeting with a Child      Date completed: \_\_\_\_\_      Case name/number: \_\_\_\_\_      Judge/Commissioner \_\_\_\_\_

I hereby certify that during the preceding year, I have attended at least 15 units of Continuing Legal Education approved for credit by the State Bar of California relating directly to representation of Parents and Minors in dependency proceedings (5 of these units may be satisfied through self-study, the remaining 10 units must be “participatory”); (Please include attachment if more space is needed):

	<b>Title of Training</b>	<b>Date(s) of training</b>	<b>Number of Hours</b>	<b>Provider</b>	<b>Self-Study (S) Participate (P)</b>
1.					
2.					

3.					
4.					
5.					

**I hereby declare under penalty of perjury that all of the information in this application is true and correct and that I had full responsibility for all cases listed in the application, or if not, I have attached an explanation.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**III: Appeals**

**W & I Code § 300**

The majority of appeals arising out of Class 1 are handled by attorneys appointed through the First District Appellate Program (FDAP). If you wish to be referred to individuals interested in privately retaining an attorney in a matter arising out of a Section 300 matter described in Class 1, you must meet the following Experience Requirements:

Applicant must qualify for Class 1 AND be a certified Child Welfare Law Specialist.

I am a certified specialist in Child Welfare Law. Certification expiration date: \_\_\_\_\_

**I hereby declare under penalty of perjury that all of the information in this application is true and correct and that I had full responsibility for all cases listed in the application, or if not, I have attached an explanation.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**MUST BE SIGNED BY ALL APPLICANTS**

**I, the undersigned, have read the foregoing conditions for membership to the Juvenile Dependency Law Court Appointment sub panel and agree to be bound by them and I had full responsibility for all cases listed in the application, or if not, I have attached an explanation.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_