

FAMILY LAW AND FAMILY CHILD CUSTODY PANEL

STATEMENT OF QUALIFICATIONS

APPLICANT INFORMATION:

NAME: _____YEAR OF ADMISSION _____ I. CERTIFIED SPECIALIST (Certification qualifies the holder to join the Panel.) □ I am currently certified as a Specialist in Family Law by the State Bar. MINIMUM QUALIFICATIONS (If not certified) П. To qualify for Family Law referrals, I attest that within the two (2) years immediately preceding I have: A. Handled at least five (5) dissolutions of marriage from inception to final decrees, opposing party being represented by counsel at all stages, including one contested trial before a court involving issues of support or property division; and Handled at least three (3) Request for Orders with opposing party represented by counsel, with B. contested hearings (excluding attorney fee issues) presenting testimony before the court; and C. At least two (2) of the contested hearings in (A) or (B) above included a contested child custody issue including visitation rights; and D. Have attended at least twelve hours of courses in Family Law: Title: _____ Date: _____ Sponsored by: Title: _____ Date: _____ Sponsored by: I Certify that I am familiar with State laws and Court Rules relating to child support and spousal E. support and am familiar with computerized procedures and methods of calculating divisions of property and child and spousal support. MINIMUM OUALIFICATION INFORMATION Name of Date of Trial Custody Court/Jurisdiction Case No. Opposing Counsel Conclusion **(**[▶]1) ([▶]1)

_____ 5. _____ ____ Request for Orders with contested hearings and testimony presented before the court

2. _____

4.

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III. <u>ALTERNATE QUALIFICATIONS</u>

A participating attorney who does not meet the Minimum Qualifications for the Family Law Panel may alternatively qualify to receive referrals after having submitted the following statement to the Lawyer Referral & Information Service Committee of completion of the following procedures.

- A. To qualify for Family Law referrals <u>not</u> involving child custody issues, I attest that:
- □ 1. I have observed court proceedings in domestic relations matters in the Orange County Superior Court as follows:
 - a. A minimum of six (6) hours divided in two (2) or more Orange County Family Law Courtrooms. Please list
- □ 2. I have read and understand both the California Rules of Court and the Orange County Superior Court Rules relating to domestic relations proceedings and procedures.
- □ 3. I have attended a six-hour clinical law program by an approved California State Bar MCLE provider in the area of Family Law. Applicant must provide a copy of the certificate.
- □ 4. I certify that I am familiar with State laws and Court rules relating to child support and spousal support and am familiar with computerized procedures and methods of calculating divisions of property and child and spousal support.
- B. To qualify for family law referrals *involving child custody is*sues, I attest that:
- □ 1. I have handled two contested child custody hearing, from inception through conclusion as follows:

Court/Jurisdiction:	Case No. :
Name of Supervising Attorney (if any):	
Name of Opposing Counsel:	
Date of Conclusion:	
Court/Jurisdiction:	
Name of Supervising Attorney (if any):	
Name of Opposing Counsel:	
Date of Conclusion:	

Alternate Qualifications continued on following page

ALTERNATE QUALIFICATIONS CONTINUED

□ 2. I am familiar with child custody proceedings and procedures including discovery and negotiations; ex parte orders; use of probation reports; preparation of appropriate orders; and the enforcement of orders.

IV. APPLICATION FOR SPECIAL CONSIDERATION

In lieu of, or in addition to the above provisions, a panel attorney may make application to the Lawyer Referral & Information Service Committee, in person or in writing, for consideration based on such lawyer's special qualifications for participation on the Family Law Panel.

I submit this Statement of certification or () Minimum () Alternate Qualifications or other evidence of my eligibility to participate on the Family Law Panel of the Orange County Bar Association Lawyer Referral & Information Service. I understand that the information contained herein is subject to reasonable verification and I agree to cooperate with the Lawyer Referral & Information Service Committee and its designees in the process of evaluating my qualifications. I declare, under penalty of perjury, that the foregoing is true and correct.

SIGNATURE OF APPLICANT

DATE