



**UNITED STATES DISTRICT COURT**  
*District of Rhode Island*

**APPLICATION FOR APPOINTMENT TO THE  
CRIMINAL JUSTICE ACT PANEL**

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**ATTORNEY INFORMATION**

Attorney Name: \_\_\_\_\_ RI Bar #: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Date admitted to this Bar: \_\_\_\_\_  
\_\_\_\_\_ E-mail: \_\_\_\_\_

**Language Fluency:** If you are fluent in a language other than English, check the appropriate box below.

Spanish  Other \_\_\_\_\_

**GENERAL REQUIREMENTS:**

Certify that you meet each of the following requirements for appointment by writing your initials in the blank and providing any other information required.

1. I am a member of the Rhode Island Bar in good standing: \_\_\_\_\_ (initial)  
Number of years as a member: \_\_\_\_\_
2. I will serve as a mentor for attorneys seeking to qualify for court appointment: \_\_\_\_\_ (initial)

**CONTINUING LEGAL EDUCATION:**

List the CLE courses and credit hours that you have taken in the last year. (Four hours in criminal law or procedure are required.)

- |          |                    |
|----------|--------------------|
| 1. _____ | Credit Hours _____ |
| 2. _____ | Credit Hours _____ |
| 3. _____ | Credit Hours _____ |
| 4. _____ | Credit Hours _____ |
| 5. _____ | Credit Hours _____ |

**EXPERIENCE:**

The following are (**cases / trials / jury trials**) that I have handled as (**lead counsel / associate counsel**) to completion/verdict.

<u>Case #</u>	<u>Case Name</u>	<u>Court</u>	<u>Charge</u>	<u>Disposition</u>
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____

**OTHER RELEVANT EXPERIENCE:**

Please describe any other relevant experience that qualifies you for appointment to the CJA Panel.

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I hereby certify that the foregoing is true and correct.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date