

**APPLICATION FOR  
KING COUNTY SUPERIOR COURT  
ATTORNEY, GUARDIAN AD LITEM AND VISITOR REGISTRIES  
2025 RENEWAL FORM**

**This renewal application is for persons currently serving on the King County Superior Court Guardian ad Litem Registries**

**NOTE:** This application is mandatory, and all questions **must** be answered in the order in which they are given. Answers that only refer to a resume or curriculum vitae are **not** acceptable **although** a resume/curriculum vitae is required, and you may attach supporting materials. Unless directed otherwise, please return completed application, resume and any materials to [SCGAL@KINGCOUNTY.GOV](mailto:SCGAL@KINGCOUNTY.GOV). **PLEASE DO NOT MAIL YOUR MATERIALS.**

**PLEASE RETURN THE APPLICATION FORM AND ATTACHMENTS AS ONE  
DOCUMENT; RETURN THE CONFIDENTIAL RELEASE OF INFORMATION FORM AS A  
SEPARATE DOCUMENT.**

**THIS IS PUBLIC INFORMATION**

This RENEWAL application is required to continue serving as a Guardian ad Litem, Visitor, or Attorney on the King County Guardian ad Litem and Court registries.

**I. CONTACT INFORMATION:**

Name: \_\_\_\_\_

WSBA #: \_\_\_\_\_ Year admitted to practice law: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Business Telephone Number: \_\_\_\_\_

## **II. REGISTRIES:**

Please check the applicable boxes:

<b>I am currently on this registry</b>	<b>I would like to continue, be added or be removed from this registry</b>		
Title 11 Adult Guardianship/Conservatorship Visitor	<input type="checkbox"/> continue	<input type="checkbox"/> add	<input type="checkbox"/> remove
Title 11 Adult Guardianship/Attorney	<input type="checkbox"/> continue	<input type="checkbox"/> add	<input type="checkbox"/> remove
Title 11 Minor Guardianship/Conservatorship Visitor	<input type="checkbox"/> continue	<input type="checkbox"/> add	<input type="checkbox"/> remove
Title 11 Minor Guardianship/Conservatorship Attorney for Parent/Party	<input type="checkbox"/> continue	<input type="checkbox"/> add	<input type="checkbox"/> remove
Title 11 Minor Guardianship/Conservatorship Attorney for Minor	<input type="checkbox"/> continue	<input type="checkbox"/> add	<input type="checkbox"/> remove
Title 26 Family Law Guardian ad Litem	<input type="checkbox"/> continue	<input type="checkbox"/> add	<input type="checkbox"/> remove
SPR 98.16 Minor Settlement Guardian ad Litem	<input type="checkbox"/> continue	<input type="checkbox"/> add	<input type="checkbox"/> remove

If you are interested in being added to any of the below non-rotational lists, please send an email to [SCGAL@KINGCOUNTY.GOV](mailto:SCGAL@KINGCOUNTY.GOV)

- Probate Guardian ad Litem
- Title 4 Litigation GAL/Attorney
- GR 33 Attorney

If you are already on one of the non-rotational lists no action is needed.

## **III. TRAINING:**

I am registered for or have attended the following trainings approved by the King County Superior Court that are required for all renewal applicants for the Title 11 Adult & Minor Guardianship, Title 26 Domestic Relations, and SPR 98.16 Minor Settlement registries. A copy of the certificate from the training evidencing successful completion is required to be sent to [SCGAL@KINGCOUNTY.GOV](mailto:SCGAL@KINGCOUNTY.GOV) with this application or within 10 days of training completion. Please contact the training provider if you cannot locate a copy of your training certificate.

1. **Title of Training:** \_\_\_\_\_

**Completion Date:** \_\_\_\_\_ **County/Sponsor:** \_\_\_\_\_

Completion Certificate ☐ Is attached ☐ will be emailed.

IF YOU ARE APPLYING FOR MULTIPLE REGISTRIES  
PLEASE FILL IN THE ADDITIONAL INFORMATION BELOW

2.     **Title of Training:** \_\_\_\_\_  
          **Completion Date:** \_\_\_\_\_ **County/Sponsor:** \_\_\_\_\_  
          Completion Certificate ☐ Is attached ☐ will be emailed.
3.     **Title of Training:** \_\_\_\_\_  
          **Completion Date:** \_\_\_\_\_ **County/Sponsor:** \_\_\_\_\_  
          Completion Certificate ☐ Is attached ☐ will be emailed.
4.     **Title of Training:** \_\_\_\_\_  
          **Completion Date:** \_\_\_\_\_ **County/Sponsor:** \_\_\_\_\_  
          Completion Certificate ☐ Is attached ☐ will be emailed.
5.     **Title of Training:** \_\_\_\_\_  
          **Completion Date:** \_\_\_\_\_ **County/Sponsor:** \_\_\_\_\_  
          Completion Certificate ☐ Is attached ☐ will be emailed.
6.     **Title of Training:** \_\_\_\_\_  
          **Completion Date:** \_\_\_\_\_ **County/Sponsor:** \_\_\_\_\_  
          Completion Certificate ☐ Is attached ☐ will be emailed.

Please report updated formal education and any relevant specialties since your last application.  
This information may be used for out of rotation appointments requiring special expertise.

#### **IV. PAYMENT:**

**A. TITLE 11 ADULT AND MINOR GUARDIANSHIP/CONSERVATORSHIP APPLICANTS**

**ONLY:** I understand that by submitting my application, I agree to accept appointment in both public pay and private pay cases unless I have previously notified the Guardian ad Litem Registry Manager of my unavailability, have a conflict, or other unforeseen circumstances. I further understand that Guardian ad Litem fees are set by the Order Appointing Guardian ad Litem pursuant to LGALR 4 and are customarily limited to \$70 per hour for public pay cases and \$275 per hour for private pay cases.

☐ AGREE

☐ DISAGREE

☐ NOT APPLICABLE

**B. TITLE 26 APPLICANTS ONLY.** RETAINER \_\_\_\_\_ HOURLY RATE \_\_\_\_\_.

**V. HISTORY:**

**A.** Please list the number of years of experience you have as a Guardian ad Litem, court visitor, or similar. \_\_\_\_\_

**B.** Number of appointments you have received and all counties of appointment :  
if served on any other county Guardian ad Litem Registry. If you are applying  
for more than one registry, please check this box and include an attachment

Type of Appointment	County	Number of appointments

**C.** Since your last registry application, unrelated to party status from GAL appointments, have you been named as a party or witness in any civil or criminal proceeding involving allegations of domestic violence or anti-harassment?

☐ Yes, please contact me for additional information

☐ No

**D.** Since your last registry application, have there been any of the following:

☐ YES ☐ NO Professional complaints

☐ YES ☐ NO Investigations or disciplinary actions

☐ YES ☐ NO Lawsuits or professional liability claim

☐ YES ☐ NO Order for removal of the Guardian ad Litem prior to completion of the Guardian ad Litem duties.

If any of the above are checked yes please attach a description of the nature, status and outcome

☐ I affirm that since my last registry application there have been no professional complaints, investigations or disciplinary actions, lawsuits or professional liability claims and any order for removal of the GAL prior to completion of the GAL duties.

☐ I affirm that since my last registry application there have been no claims or litigation involving allegations of improper fee charges, charges of fraud, theft or other forms of dishonesty or professional malpractice.

**E.** I am presently not serving, nor have I recently applied to serve, as a Judge or Commissioner pro tempore in King County Superior Court. I understand that I am not permitted to serve as a Title 11 or Title 26 Guardian ad Litem and pro tempore judicial officer at the same time.

☐ AGREE

☐ DISAGREE

☐ NOT APPLICABLE

**F.** I have no criminal history or license suspension or revocation since my last application/renewal application.

☐ AGREE

☐ DISAGREE

☐ NOT APPLICABLE

**G.** I am not the subject of any pending investigation or action by a government agency, professional organization or one that would result in either a criminal conviction or a license revocation or suspension.

☐ AGREE

☐ DISAGREE

☐ NOT APPLICABLE

## **VI. ATTACHMENTS:**

Each application shall be accompanied by the following documentation (**please check each box to confirm information is attached or incorporated herein**):

- ☐ Copy of the certificate from the training provider evidencing successful completion of the current training required for the area of practice;
- ☐ Washington State Patrol criminal history (30 days old or less); You may obtain the record here: <https://fortress.wa.gov/wsp/watch/>
- ☐ Curriculum vitae, showing work and professional or personal experience in or related to the field that would assist in the performance and completion of Guardian ad Litem duties;
- ☐ Signed release of information directed to all professional regulatory bodies, which have licensed or supervised the applicant within the last ten years in a separate PDF;
- ☐ Description of the nature, status, and outcome of any new professional complaints, investigations or disciplinary actions, lawsuits or professional liability claims, and any order for removal of the Guardian ad Litem prior to completion of the duties assigned to the Guardian ad Litem since my last application.
- ☐ Description of any claims made, or litigation commenced, involving allegations of improper fee charges, fraud, theft or other forms of dishonesty or professional malpractice or misconduct since my last application.

**I certify that I have thoroughly studied the provisions and requirements of the relevant RCW and believe I am and/or continue to be fully qualified to be appointed in the requested capacity for cases in King County, Washington. I acknowledge it is my responsibility to notify the GAL manager of any changes to my initial application and certify this renewal application is complete and accurate.**

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Signature

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Date of Signing

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Print Name

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Place of Signing

**DIGITAL SIGNATURE PERMITTED.**

**Please continue to next page.**

## **Addendum to Application**

**Please list all documents attached to this application**

Section Letter and number: \_\_\_\_\_

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Section Letter and number: \_\_\_\_\_

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Section Letter and number: \_\_\_\_\_

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Section Letter and number: \_\_\_\_\_

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Section Letter and number: \_\_\_\_\_

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