

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

**This application is for persons wishing to be included 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 by **May 30, 2025 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 application is required to be considered 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:

### **I would like to be added to this registry**

<input type="checkbox"/>	Title 11 Adult Guardianship/Conservatorship Visitor
<input type="checkbox"/>	Title 11 Adult Guardianship/Attorney
<input type="checkbox"/>	Title 11 Minor Guardianship/Conservatorship Visitor
<input type="checkbox"/>	Title 11 Minor Guardianship/Conservatorship Attorney for Parent/Party
<input type="checkbox"/>	Title 11 Minor Guardianship/Conservatorship Attorney for Minor
<input type="checkbox"/>	Title 26 Family Law Guardian ad Litem
<input type="checkbox"/>	SPR 98.16 Minor Settlement Guardian ad Litem

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

## **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 include any formal education and any relevant specialties on your Curriculum Vitae. 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.** Have you ever been named as a defendant or respondent in any case involving allegations of domestic violence or harassment?

- Yes, a document stating the date, name of the court, court cause number, and summary of the allegations is attached.
- Yes, please contact me for additional information
- No

**D.** Have you ever been named as a petitioner or witness in any case involving allegations of domestic violence or harassment?

- Yes, a document stating the date, name of the court, court cause number, and summary of the allegations is attached.
- Yes, please contact me for additional information
- No

**E.** Have you had any professional complaints, investigations, disciplinary actions, lawsuits, or professional liability claims, and any order for removal of the Guardian ad Litem prior to the completion of the Guardian ad Litem duties:

- A description is attached
- I affirm that 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 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.

F. 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 Guardian ad Litem and pro tempore judicial officer at the same time.

AGREE  DISAGREE

G. I have no criminal history or license suspension or revocation.

AGREEE  DISAGREE

H. 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.

AGREEE  DISAGREE

## **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.

**I certify that I have thoroughly studied the provisions and requirements of the relevant RCW and believe I am 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 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: \_\_\_\_\_

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

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

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

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