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 <u>refer</u> to a resume <u>or</u> 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 <u>SCGAL@KINGCOUNTY.GOV</u>. **PLEASE DO NOT MAIL YOUR MATERIALS.**

PLEASE RETURN THE APPLICATION FORM AND ATTACHMENTS AS <u>ONE</u>

<u>DOCUMENT</u>; 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 p	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

Title 11 Adult Guardianship/Conservatorship Visitor
Title 11 Adult Guardianship/Attorney
Title 11 Minor Guardianship/Conservatorship Visitor
Title 11 Minor Guardianship/Conservatorship Attorney for Parent/Party
Title 11 Minor Guardianship/Conservatorship Attorney for Minor
Title 26 Family Law Guardian ad Litem
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

- 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 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.

litle of Training:		
Completion Date:County/Sponsor:		
Completion Certificate \square Is attached \square will be emailed.		
IF YOU ARE APPLYING FOR MULTIPLE REGISTRIES		
PLEASE FILL IN THE ADDITIONAL INFORMATION BELOW		
Title of Training:		
Completion Date:County/Sponsor:		
Completion Certificate \square Is attached \square will be emailed.		

	Completion Date:County/Sponsor: Completion Certificate □Is attached □ will be emailed.
4	
4.	Title of Training:
	Completion Date:County/Sponsor: Completion Certificate □Is attached □ will be emailed.
F	
5.	Title of Training:
	Completion Date:County/Sponsor: Completion Certificate □Is attached □ will be emailed.
6	
6.	Title of Training:
	Completion Date:County/Sponsor: Completion Certificate □Is attached □ will be emailed.
	completion certificate bis attached b will be emailed.
PAYMEN	
ONLY: I und in both publ ad Litem Recircumstance Appointing 6	DULT AND MINOR GUARDIANSHIP/CONSERVATORSHIP APPLICANTS derstand that by submitting my application, I agree to accept appointment lic pay and private pay cases unless I have previously notified the Guardian gistry Manager of my unavailability, have a conflict, or other unforeseen less. I further understand that Guardian ad Litem fees are set by the Order Guardian ad Litem pursuant to LGALR 4 and are customarily limited to \$70 or public pay cases and \$275 per hour for private pay cases.
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A. TITLE 11 ALL ONLY: I und in both publication and Litem Recircumstance Appointing oper hour for AG. TITLE 26 ALL HISTOR	DULT AND MINOR GUARDIANSHIP/CONSERVATORSHIP APPLICANTS derstand that by submitting my application, I agree to accept appointment lic pay and private pay cases unless I have previously notified the Guardian gistry Manager of my unavailability, have a conflict, or other unforeseen less. I further understand that Guardian ad Litem fees are set by the Order Guardian ad Litem pursuant to LGALR 4 and are customarily limited to \$70 republic pay cases and \$275 per hour for private pay cases. REE DISAGREE NOT APPLICABLE PPLICANTS ONLY. RETAINER HOURLY RATE

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	for more than one registry please check this box and include an attachment:				
	Type of Appointment	County	Number of appointments		
	ve you ever been named as a deg gations of domestic violence or l		in any case involving		
	☐ Yes, a document stating th and summary of the allega		urt, court cause number,		
	☐ Yes, please contact me for	additional information			
	□ No				
	ve you ever been named as a pergations of domestic violence or l		ny case involving		
	☐ Yes, a document stating the and summary of the allegate		urt, court cause number,		
	☐ Yes, please contact me for	additional information			
	□ No				
lav	ve you had any professional com vsuits, or professional liability cla ardian ad Litem prior to the com	ims, and any order for	removal of the		
	☐ A description is attached				
	☐ I affirm that there have been disciplinary actions, lawsuits removal of the GAL prior to	or professional liability c	laims and any order for		
		-	nvolving allegations of improp ns of dishonesty or profession		

Co am	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.			
	AGI	REE 🗆	DISAGREE	
G. I h	ave r	no criminal history or lic	cense suspension or revocation.	
	AGF	REEE 🗆	DISAGREE	
ag	ency	, professional organizat	nding investigation or action by a government ion or one that would result in either a e revocation or suspension.	
	l AG	REEE	DISAGREE	
VI. A	ГΤА	CHMENTS:		
		tion shall be accompani rmation is attached or i	ied by the following documentation (please check each box to incorporated herein):	
		• •	e from the training provider evidencing successful ent training required for the area of practice;	
		_	ol criminal history (30 days old or less); You may obtain the rtress.wa.gov/wsp/watch/	
			ring work and professional or personal experience in or twould assist in the performance and completion of ies;	
		=	rmation directed to all professional regulatory bodies, r supervised the applicant within the last ten years in a	
		complaints, investigation liability claims, and any	ture, status, and outcome of any new professional ions or disciplinary actions, lawsuits or professional y order for removal of the Guardian ad Litem prior to ies assigned to the Guardian ad Litem since my last	
			claims made, or litigation commenced, involving refee charges, fraud, theft or other forms of dishonesty ctice 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.

Signature	Date of Signing
Print Name	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:	
Section Letter and number	