
APPLICATION FOR MEMBERSHIP ON THE CRIMINAL JUSTICE ACT DEFENSE PANEL

UNITED STATES DISTRICT COURT
DISTRICT OF ARIZONA

TUCSON DIVISION

APPLICATIONS MUST BE RECEIVED BY THE FIRST FRIDAY IN AUGUST EACH YEAR
TO BE PLACED ON THE PANEL FOR THE FOLLOWING YEAR

I am applying to (check all that apply):

Felony Panel

Misdemeanor Panel

Appellate Panel

For appellate panel, please attach:

1) a recently authored appellate opening brief;

2) a list of federal appeals handled in the past five years (include case name and number)

Applying for Spanish speaking panel?*

Yes

No

*A preliminary Spanish assessment will be conducted by phone. Upon passing this assessment, a full Spanish evaluation will be scheduled and a passing score required in order to be appointed to the Spanish speaking panel.

Instructions: Type or print legibly. **Please include a resume and cover letter explaining the nature of your current law practice and detailing any other pertinent experiences or training.**

APPLICATION OF:

Name

Address

City

State

Zip

Telephone

Fax

E-MAIL ADDRESS:

LEGAL EXPERIENCE

1. Legal Education:

School Degree Year of Graduation

2. Date admitted to practice law in:

- a. State of Arizona
- b. Other States
- c. U.S. District Court (Arizona)
- d. Other U.S. District Courts
- e. Ninth Circuit
- f. U.S. Supreme Court

I am a member in good standing in these jurisdictions. Yes No

*If not please explain on separate sheet.

3. Are there now pending or have there been any disciplinary proceedings against you in any jurisdiction during the past 5 years? If yes, please explain on a seperate sheet.

Yes No

4. During the past 5 years, have you been arrested, summoned, charged, or convicted of any criminal offense (excluding minor traffic infractions)? If yes, please explain on separate sheet.

Yes No

5. For the 3 years preceding this application, please list in the final pages of this Application all criminal trial experience and all appellate experience, whether state, federal, or other. (You may incorporate by reference the list of all federal criminal appeals carried in the past five years.)

6. Also on the final pages, please list any additional criminal matters carried to final disposition in state or federal court (motions, habeas corpus, mandamus, guilty pleas or other dispositions, etc.) that may further support this application.

7. Do you have any specialized experience such as:

a. Fluency in another language?

Specify:

Language fluency will be verified by a Federal Defender certified court interpreter.

b. Immigration law?

c. Other (e.g. DNA, accounting, computers)?

Explain:

8. Have you ever been employed as a full-time prosecutor, public defender, judge, or judicial law clerk?

Yes

No

If so, name the office or judge and dates of employment:

9. Are you presently certified as a Criminal Law Specialist by a state bar?

Yes

No

If yes, date certified.

State:

10. Are you now or have you ever been a member of any national, state or local criminal defense organization?

Yes No

Specify:

11. Are you presently a member of any federal, state or local court criminal defense panel?

Yes No

If yes, date of membership:

Approximate number of case assignments per year:

12. Have you previously served as a member of any federal, state or local criminal defense panel? Yes No

If yes, date of membership:

If yes, please explain why and when your panel participation ended:

13. Have you ever been denied placement on, or removed from, a federal, state or local criminal defense panel due to misconduct or performance-related concerns?
Yes No

If yes, please state location and date and explain, **or** explain on separate sheet.

14. Do you have any other legal training or experience relevant to membership on the CJA panel? Yes No

Specify:

15. The Criminal Justice Act Plan for the District of Arizona (General Order 18-12) requires a Panel member to accept a minimum of 4 appointments per year. That is an average of one case every 3 months and this is required without regard to the nature of the case. Are you willing to satisfy or exceed this requirement?

Yes No

16. Are you available to represent a defendant in a case where trial might exceed ten (10) trial days?

Yes No N/A (Applying to appellate panel only)

REFERENCES

17. Please provide the name, telephone number, and email address of **at least 3** local, state and/or federal prosecutors and/or criminal defense lawyers **against whom you have litigated** criminal matters.

a. Name:
Email address:
Phone:

b. Name:
Email address:
Phone:

c. Name:
Email address:
Phone:

18. Please provide the name, telephone number, and email address of **at least 2** local, state, and/or federal **judges** familiar with your work as a criminal attorney.

a. Name:
Email address:
Phone:

b. Name:
Email address:
Phone:

c. Name:
Email address:
Phone:

19. Please state any additional information you wish to provide in further support of your application. This may include attendance within the past 5 years at CLE courses and seminars addressing federal criminal appellate or trial practice or highlighting trial experience. Attach an additional sheet if necessary.

CERTIFICATION

I (NAME)_____ hereby authorize all educational and governmental agencies and instrumentalities (including bar associations and bar examiners), employers, and business and professional associates (past and present), to release to the Panel Selection Committee of the United States District Court information, files or records requested by them for the purpose of processing this application.

I state I will satisfy all requirements of a CJA Panel lawyer as set forth in the CJA Plan for the District of Arizona (General Order 18-12), including (a) accepting a minimum of 4 cases appointments per year, (b) **attending at least 3 hours of CLE training applicable to my federal criminal defense practice and certifying that CLE yearly**, and (c) applying for reappointment to the CJA Panel every 3 years. I understand that noncompliance may lead to my removal from the CJA Panel.

I further state that I have carefully read the foregoing application and certify that the information herein is true to the best of my knowledge and belief. I understand that failure to truthfully disclose any item of information required may result in denial of my application.

DATE: _____

APPLICANT SIGNATURE

SEND COMPLETED APPLICATION VIA FAX, MAIL, OR EMAIL (as a Word or pdf attachment) to:

Denise K. Aguilar
Federal Public Defender
850 W. Adams St., Ste. 201
Phoenix, Arizona 85007

FAX 602-382-2800
Denise_Aguilar@FD.org

