## QUESTIONNAIRE FOR COURT APPOINTMENTS IN THE PROBATE DIVISION SUPERIOR COURT OF THE DISTRICT OF COLUMBIA

The following Questionnaire is to be completed by attorneys requesting to serve as fiduciaries, counsel, guardian, guardian <u>ad litem</u> or visitors in the Probate Division of the Superior Court of the District of Columbia.

Chambers of Judge A. Franklin Burgess, Jr., Presiding Judge, maintains a listing for the above appointments in decedents' estates, guardianships of minors proceedings, and intervention proceedings. Attorneys must indicate which area(s) they would want to serve. See question 7.

In order to be included on the list, attorneys must meet the minimum qualifications required for practice in the D.C. Courts, as well as the following additional qualifications: (1) the attorney must be available on reasonable notice; (2) the attorney must provide the Court with a current address and business telephone number, (**Post Office Box numbers will not be accepted**); and (3) the attorney must certify upon the submission of this questionnaire that he or she has a working knowledge of the law pertaining to the administration of decedents' estates and guardianships of minors and/or intervention proceedings and have taken the three-part Probate Education Seminar.

Name.			
Bar No.:	-		
Office Address:			
(P.O. Box 1	number <b>may not</b> be substituted)		
Office Phone:	Fax Number:		
Home Address:			
Home Phone:	E-Mail Address:		
Education and Bar Admissions:			
Law School:			
Graduation Year:			
Date of Admission to practice in the District of Columbia:			
	Bar No.:		

Other Jurisdictions of Bar Admission:

	Jurisdiction or Court	Location	<u>Date</u>		
(3)	Disciplinary Actions:				
	Have you ever been discipling action by the Bar of any jurist please explain in detail on address what disciplinary action.	sdiction or by any Court? _ a separate sheet of paper	If so, er bearing your name and		
(4)	Removal:				
	Have you ever been removed as a fiduciary by any Court? If so please explain in detail on a separate sheet of paper bearing your name and address the nature of the conduct that led to the removal.				
(5)	Probate-related Practice Background:				
	List any Continuing Lega participant, in probate or inte	<u>=</u>			
<u>Date</u>	Course/Subject	<u>Credit Hours</u>	<u>Sponsor</u>		

language or pro			te any special qualifications you possess, such as fluency in a foreign professional degrees (other than the juris doctorate) which you d be considered in your appointments.	
(7)	Please check the appropriate box or boxes to indicate where you are requesting to serve:			
	[]	a.	Decedents' Estates and Guardianship of Minor Proceedings (to serve as personal representative or guardian).	
	[]	b.	Intervention Proceedings (to serve as counsel, guardian, conservator, guardian <u>ad litem</u> or visitor).	
(8)	Are you available for emergency appointments during non-business hours by prarrangement with the emergency judge?  [ ] [ ] yes no			
(9)	I cert	ify that:	(See instructions below).	
	[]	a.	I am available for service upon reasonable notice from the court or counsel in any given case.	
	[]	b.	I have a working knowledge of the law and procedures pertaining to the administration of decedents' estates in the District of Columbia and guardianships of minors, including Titles 18, 19, 20, 21 of the District of Columbia Code, D.C. Superior Court Rules of the Probate Division 1-212 and applicable Civil Rules.	

	[]	c.	I have a working knowledge of the law and procedures pertaining to conservatorships and guardianships of adults, (Intervention Proceedings), including Title 21 of the District of Columbia Code, D.C. Superior Court Rules of the Probate Division 301-361 and the applicable Civil Rules.
	[]	d.	I understand that if at any time I am unable to fulfill the obligations of an appointment by the court I must immediately, upon my knowledge of the inability, file a motion to vacate the appointment or for leave to withdraw.
	[]	e.	I have attached my certificate concerning discipline from the Office of Bar Counsel.
	I decla	re and a	affirm that the foregoing answers and statements are true and
correct	•		
			Signature

## **INSTRUCTIONS**

- 1. You must certify knowledge of the law and procedures pertaining to decedents estates and guardianships of minors to be included on the list for appointments in those cases, and you must certify knowledge of the law and procedures pertaining to intervention proceedings to be included on the list for appointments in those proceedings.
- 2. Failure to accept an appointment may subject you to removal from the appointment lists for all future cases.

## CERTIFICATES CONCERNING DISCIPLINE

## **Instructions**

As part of this application process, you must obtain a **Certificate Concerning Discipline** from the Office of Bar Counsel, 515 5<sup>th</sup> Street, N.W., Room 117, **Washington, D.C. 20001**. The cost of the Certificate is \$20.00, which must be paid by check or money order made payable to the D.C. Bar. We recommend that you request the Certificate by mail.

Your request must contain the following language:

In connection with this request, I expressly authorize the Office of Bar Counsel to reveal confidential information about me, including information about any complaint filed against me that might be pending or that has been dismissed; any informal admonition issued prior to January 1, 1995; or any other investigation of me conducted by Bar Counsel in connection with disciplinary matters.

In addition, your request also <u>must be affirmed before a Notary Public</u>. (A form you may use to make this request is attached with these materials, or you may download a copy of a request form from the D.C. Bar Website at <u>www.dcbar.org/for\_lawyers/ethics/discipline.</u>)

Please allow at least three (3) days for preparation of the Certificate plus additional time for mailing. If you have questions, you may call the Office of Bar Counsel at 202/638-1501.

Office of Bar Counsel 409 E Street, N.W. Building B, Room 228 Washington, D.C. 20001

To Whom it May Concern:

Please prepare a Certificate Concerning Discipline for me. I have enclosed a check or money order payable to the D.C. Bar in the amount of \$20.00 and a self-addressed, postage prepaid envelope for returning the Certificate to me. I have also provided my D.C. Bar number and have had my request affirmed before a Notary Public as indicated below.

In connection with this request, I expressly authorize the Office of Bar Counsel to reveal confidential information about me, including information about any complaint filed against me that might be pending or that has been dismissed; any informal admonition issued prior to January 1, 1995; or any other investigation of me conducted by Bar Counsel in connection with disciplinary matters.

Bar Number:	
	Signature
Phone Number:	
	Name (Printed)
	Address
	City, State, Zip Code
Affirmed before me this day of	, 200
	<del></del>
	Notary Public