

Weighted Caseload Study

Please complete this form and fax it to the Office of Court Administration WHETHER OR NOT YOU AGREE TO PARTICIPATE IN THIS STUDY.

District Court: _____

Judge Name: _____

Email: _____

Do you agree to participate in the time study?

Yes

No

Please Return by **September 14, 2007**

to: Andy Barbee

Office of Court Administration

Fax No.: 512/463-1648

For participating judges:

Do any visiting judges (who regularly staff an auxiliary court or regularly handle a special docket), associate judges, masters, magistrates, or referees assist your court? Please list them below. Please use reverse side if additional space is needed.

Title	Name	Phone	Email
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____