

**INFORMATION AND APPLICATION INSTRUCTIONS**  
**PROBATE COURT APPOINTMENT LIST FOR ADOPTION CASES**

**LOCAL RULES**

The application requirements apply to attorneys seeking to be placed on any appointment lists for the first time *and* attorneys who have failed to maintain compliance as required by Local Rule, Rule of Superintendence, or the Ohio Administrative Code and are seeking to reapply or be reinstated to a list.

The Probate Appointment Lists will be addressed by administrative order pending a local rule change. All administrative orders can be accessed on the court's website.

It is imperative that you are familiar with these rules. The information herein is only a summary of the appointment list requirements. If, after consulting the rules, you still have questions, you may contact the Adoption Department at 614-525-3840.

**CONTACT INFORMATION**

Enter your basic contact information in the space provided.

- (1) Cell Phone Number: Check "Preferred" if you would like your cell phone to be your primary telephone contact for parties and opposing counsel. Otherwise, your cell phone number will not be included on the published appointment list but may be used for contact by court personnel.
- (2) Email Address: Your email address will be the primary method utilized for communication by the court concerning the appointment list but will not be published without your consent.
- (3) Except for when a judge or magistrate appoints an individual directly from the bench, appointments are generally made by the Appointed Counsel Deputy Clerk on a rotating basis from the attorneys on each list. You will be notified by email from the Appointed Counsel Deputy Clerk of the availability of a new appointment. You are expected to reply within 48 hours, or the case will be offered to another attorney.

**REQUIREMENTS FOR THE PROBATE COURT APPOINTMENT LIST FOR ADOPTION CASES**

All applications for the Probate Court Appointment List for Adoption Cases must be accompanied by:

- (1) A resume or biographical statement detailing the applicant's training, experience, and expertise, demonstrating the applicant's ability to successfully perform the duties and responsibilities of the appointed counsel on the Probate Appointment List for adoption cases as required by local rule;
- (2) The contested adoption cases experience form; and
- (3) Your original notarized background disclosure statement. *Note that an explanation is required for any "yes" answers, including speeding tickets and similar offenses. Documentation supporting the explanation should be included, if available.*

**Orientation Sessions:** The court's administrative order on the Probate Appointment List for Adoption Cases requires that all applicants for the Probate Court Appointment List for Adoption Cases attend an orientation session within three months of appointment on their first case (or within three months of the first class being offered, whichever is later) in order to remain eligible for placement on the list. The primary purpose of the session is to familiarize applicants with the requirements for submitting bills for payment. Court staff will discuss the general requirements for the appointment list, as well as the billing rules in detail.

The orientation sessions are scheduled as needed. The current schedule will be posted on the court's website and will be available by requesting information from the adoption department deputy clerk.

All sessions start at noon and last approximately one hour. The location of the sessions will be posted on the website. Attendees should check in with the receptionist by the elevators on the 22<sup>nd</sup> floor unless otherwise directed. For the near future, sessions may also be conducted via remote video conferencing on the Zoom platform. Attendees via remote video should expect to be available on video and engaged in the session for the entire hour.

The court follows the billing requirements of the Ohio Public Defender's Office. All attendees are encouraged to familiarize themselves with the billing rules prior to the orientation session.

There is no formal sign-up or application required to attend the sessions. However, if you intend to attend, please notify the Adoption Department Deputy Clerk, Julie Kimnach, at 614-525-3840 or jakimnac@franklincountyohio.gov.

### **APPOINTMENT LIST REQUIREMENTS**

Due to the complex nature of adoption cases, the court is seeking experienced attorneys who can adequately represent birth parents in these proceedings. If you do not have one at least one year of experience as an attorney practicing in the area of adoption and have not participated in at least three contested adoption cases in the state of Ohio as lead or co-counsel, your application must include either proof of at least 3 hours of Ohio CLE in adoption practice and procedure *or* proof of successful completion of a clinical education program on adoption law, or a pledge to attend such courses within six months of application. Following the completion of the initial application, attorneys may be required to attend a magistrate training session on advocating in Probate Court for birth parents, courtroom etiquette, professional conduct, and billing/reimbursement requirements for appointed work within the first three months of appointment on their first case.

### **MALPRACTICE INSURANCE**

All applicants for the Probate Court Appointment List for adoption cases must either maintain professional liability (malpractice) insurance equal to the minimum coverage required by the Code of Professional Responsibility or comply with DR1-104 [Rule of Professional Conduct Rule 1.4(c)] at the time of each appointment. It is not necessary to include a copy of policy declarations with the application. Certifying compliance on the application is sufficient.

### **REQUIREMENTS TO MAINTAIN ELIGIBILITY**

All attorneys must submit an annual Certificate of No Disqualifying Circumstances. The requirements to maintain eligibility for each list can be found in the court's administrative order on the Probate Appointment List for Adoption Cases. Every attorney is responsible for knowing their individual requirements.

# ATTORNEY APPLICATION

Name: \_\_\_\_\_  
First Name Middle Name Last Name Supreme Ct.#

Current Business Address Preferred Phone Number Contact

City County State Zip Code

Email \_\_\_\_\_

## **BACKGROUND DISCLOSURE STATEMENT**

### **DRIVING HISTORY**

**Yes No**

- 1. Do you have a valid Ohio driver's license?
- 2. Have you been convicted of any moving traffic violation in the past 10 years?
- 3. Have you had any traffic violations involving alcohol or drugs in the past 10 years?

### **BACKGROUND**

- 4. Have you ever been convicted of a violation of law? Do not disclose expunged or sealed offenses.
- 5. Have you ever been charged with a crime involving a minor?
- 6. Have you ever committed an act that resulted in a child being adjudicated abused or neglected?
- 7. Do you have any condition or impairment which currently affects your ability to competently practice law?
- 8. Have you been ordered to pay child support or spousal support?
  - a. If so, are your payments current?

### **CONDUCT**

- 9. Have you ever been disbarred, suspended, censured, sanctioned, or otherwise reprimanded or disqualified as a member of the legal profession or another profession, or as a holder of public office?
- 10. Have you ever been the subject of any written charges, complaints, or grievances to a court or administrative agency concerning your conduct as a Guardian ad Litem or attorney, including any now pending? Do not disclose referrals to the Bar Association or Disciplinary Counsel unless formal action was later taken.
- 11. Has any surety on any bond on which you were the principal been required to pay any money on your behalf in the past 10 years?
- 12. Have you been denied a license for business, trade, or profession in the past 10 years?

**If you answered "yes" to any of the questions on the previous page, please attach a thorough explanation.**



**CONTESTED ADOPTION CASES EXPERIENCE FORM**

DATE \_\_\_\_\_

ATTORNEY APPLICANT \_\_\_\_\_

TELEPHONE \_\_\_\_\_

*Please include information on your three most recent adoption cases in Franklin County, or in the alternative, any other counties in which you have recently practiced. Information provided will be held in confidence and will not be publicly available.*

LEAD COUNSEL       CO-COUNSEL

CASE NUMBER \_\_\_\_\_

TRIAL DATE \_\_\_\_\_

ADDITIONAL INFO \_\_\_\_\_

LEAD COUNSEL       CO-COUNSEL

CASE NUMBER \_\_\_\_\_

TRIAL DATE \_\_\_\_\_

ADDITIONAL INFO \_\_\_\_\_

LEAD COUNSEL       CO-COUNSEL

CASE NUMBER \_\_\_\_\_

TRIAL DATE \_\_\_\_\_

ADDITIONAL INFO \_\_\_\_\_