

STATE OF TEXAS

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COUNTY OF GONZALES

**APPLICATION TO BE PLACED ON ATTORNEY AD LITEM
APPOINTMENT LIST FOR GONZALES COUNTY**

I _____, a licensed attorney in Texas, Texas State Bar Number _____
with my principal office or residence in _____ County, Texas, at _____
_____, do hereby file this application in compliance with the GONZALES COUNTY
ATTORNEY AD LITEM APPOINTMENT PROCEDURES MANUAL, and I do hereby swear or affirm that the below information
is true and accurate. Should any change in this information occur, I will file an Amended Application with the Office of Court
Administration within 30 days of the change.

REQUEST

I _____, hereby request to be placed on the Attorney Ad Litem Appointment List for the
following categories (I have read the Gonzales County Attorney Ad Litem Appointment Procedures Manual and by checking the
following categories I qualify for all each category):

- _____ Civil Cases
- _____ Guardianship Cases
- _____ Probate Cases

QUALIFICATION

I _____, swear or affirm that my qualifications are as follows:

Exact Date Licensed to Practice Law in Texas: _____

Board Card Number: _____ Number of Years of Practice: _____

Board Certification: _____ Exact Date: _____

Ad Litem CLE (last 12 months):

Course: _____ Exact Date: _____ Hours: _____

Have you ever been found or held to be ineffective counsel in the representation of a client by a Court?

_____ If yes, attach separate sheet with an explanation.

Have you ever been sanctioned by the State Bar of Texas (or a similar authority of any other state)?

_____ If yes, attach a separate sheet with an explanation (if a private sanction, the attorney may request sealing of such sanction).

I have malpractice insurance? (yes/no) _____

List other qualifications you deem appropriate for consideration: _____

Signature of Attorney

Date

Address of Attorney: _____

Phone#: _____ Cell Phone#: _____ Fax#: _____

E-mail Address: _____