

APPLICATION FORM  
UNITED STATES MAGISTRATE JUDGE

Type or legibly print your answers. If a question is not applicable, indicate this by marking "N/A." Return completed form to Thomas M. Gould, Clerk of Court.

GENERAL

1. Full name: \_\_\_\_\_
  
2. All other names by which you have been known: \_\_\_\_\_  
\_\_\_\_\_
  
3. Office address: \_\_\_\_\_  
  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
  
Telephone: \_\_\_\_\_
  
4. Residential address: \_\_\_\_\_  
  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
  
Telephone: \_\_\_\_\_
  
5. Place of birth: \_\_\_\_\_  
  
Date of Birth: \_\_\_\_\_
  
6. Length of residence in state: \_\_\_\_\_
  
7. If you are a naturalized citizen, state the date and place of naturalization:  
  
\_\_\_\_\_
  
8. Military Service:  
  
Branch: \_\_\_\_\_ Dates: \_\_\_\_\_  
  
Rank or Rate at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If still a reserve or national guard member, give service, branch unit, and present rank:

\_\_\_\_\_

9. Are you related by blood or marriage to any judges of this court? [  ] [  ]  
Yes No

If yes, give name(s) and relationship: \_\_\_\_\_

**HEALTH**

10. What is the present state of your health? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Do you have any disability, serious illness or condition that would prevent you from performing the essential functions of the position of magistrate judge? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION**

12. Colleges and universities attended, dates, and degrees: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Continuing legal education courses completed within the last 10 years: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HONORS

14. Were you a member of law review? [  ] [  ]  
Yes No
- If yes, describe role: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
15. If you have published any legal books or articles, list them, giving citations and dates:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
16. List any honors, prizes, or awards you have received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROFESSIONAL ADMISSIONS

17. List all courts (including state bar admissions) and administrative bodies having special admission requirements in which you are presently admitted to practice, giving the dates of admission in each case:
- | Court or Administrative Body | Date of Admission |
|------------------------------|-------------------|
| _____                        | _____             |
| _____                        | _____             |
| _____                        | _____             |

LAW PRACTICE

18. State the names, addresses, and dates of employment for all law firms with which you have been associated in practice, all government agencies, and all private business organizations in which you have been employed. Also provide all dates during which you have practiced as a sole practitioner.
- | Organization | Address | Position | Dates |
|--------------|---------|----------|-------|
| _____        | _____   | _____    | _____ |
| _____        | _____   | _____    | _____ |
| _____        | _____   | _____    | _____ |





Number of cases adjudicated \_\_\_\_\_

Dates of service \_\_\_\_\_

BUSINESS INVOLVEMENT

30. a) If you are now an officer, director, or otherwise engaged in the management of any business enterprise, state the name of such enterprise, the nature of the business, the nature of your duties, and whether you intend to resign such position immediately upon your appointment to judicial office.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b) Since being admitted to the Bar, have you ever engaged in any occupation, business, or profession other than the practice of law? [ ] [ ]  
Yes No

If yes, give the details, including dates.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c) During the past five years have you received any fees or compensation of any kind, other than for legal services rendered, from any business enterprise, institution, organization, or association of any kind? [ ] [ ]  
Yes No

If yes, identify the source of such compensation, the nature of the business enterprise, institution, organization of association involved, and the dates such compensation was paid. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

31. a) Have you ever been arrested, charged, or convicted for violation of any federal law, state law, county or municipal law, regulation, or ordinance?  
[ ] [ ]  
Yes No

If yes, give details. (Do not include traffic violations for which a fine of \$200 or less was imposed unless it also included a jail sentence. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

b) Have you, to your knowledge, ever been under federal, state or local investigation

for possible violation of a criminal statute? [  ] [  ]  
Yes No

If yes, give particulars. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

32. a) Have you ever been sued by a client? [  ] [  ]  
Yes No

If yes, give particulars. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b) Have you or your professional liability insurance carrier ever settled a claim against you for professional malpractice? [  ] [  ]  
Yes No

If yes, give particulars, including the amounts involved. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

33. Have you ever been charged in any civil or criminal proceedings with conduct alleged to involve moral turpitude, dishonesty, or unethical conduct? [  ] [  ]  
Yes No

If yes, give particulars. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

34. Have you ever been disciplined or cited for a breach of ethics of unprofessional conduct by any court, administrative agency, bar association, or other professional group?  
[  ] [  ]  
Yes No

If yes, give particulars. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

35. Have you filed appropriate tax returns as required by federal, state, local and other government authorities? [  ] [  ]. If no, explain.  
Yes No

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



41. a) List three individuals as references who are familiar with your abilities:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

b) List three individuals as references who are familiar with your personal character:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

CONFIDENTIALITY STATEMENT

This form will be kept confidential and will be examined only by members of the Merit Selection Panel and the judges of the district court. The individuals whom you have listed as references above may be contacted by the Panel, but no other employers, colleagues, or other individuals will be contacted without your prior approval.

I declare under penalty of perjury that the foregoing is true and correct.

Date \_\_\_\_\_

Signature of Applicant \_\_\_\_\_