

## Attorney For The Child Appeals Panel Application

AFC on the appeals panel are eligible to be substituted for trial AFC who do not wish to represent clients on appeal. If you are interested in being considered for the appeals panel, complete this application and attach the following: (1) a copy of a recent brief or substantive writing sample; (2) a copy of the Appellate Division order/memorandum decision pertaining to the case you briefed, if applicable. Mail this application **with required attachments** to Jennifer McLaren, Esq., Deputy Director, AFC Program Office, 50 East Avenue, Rochester, NY, 14604.

**Please type or print legibly**

1. Name (Enter name used for NYS attorney registration)

_____	_____	_____	_____
First	Middle	Last	Suffix (Sr., Jr.)

2. Please provide the following:

\_\_\_\_\_

Mailing address

\_\_\_\_\_

Telephone Number	Fax Number	E-Mail Address
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3. How long have you been an attorney for the child? \_\_\_\_\_

County or Counties? \_\_\_\_\_

4. In approximately how many proceedings have you appeared as attorney for the child during the past two years? \_\_\_\_\_

5. During the past two years, approximately how many times have you appeared as attorney for the child or other counsel in the following types of proceedings:

JD \_\_\_\_\_; PINS \_\_\_\_\_; custody/visitation \_\_\_\_\_; abuse/neglect \_\_\_\_\_;

TPR \_\_\_\_\_; paternity \_\_\_\_\_; adoption \_\_\_\_\_.

6. Briefly describe your appellate experience. Indicate the number of appellate briefs you have written, the type of proceeding or proceedings, and whether you represented the child, appellant, or respondent.

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7. Have you attended any CLE seminars on appellate representation in the past two years? Circle Yes / No If yes, indicate approximately how many credit hours and provide the name of the sponsoring organization.

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8. Are there types of proceedings in which you could not or would not wish to appear as appellate attorney for the child? Circle Yes / No If yes, please explain.

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9. Please attach a recent brief and a copy of the appellate order or decision, with citation. If you have not drafted a brief, please attach a substantive writing sample.

10. Personal Background:

Since submitting your most recent AFC re-designation form, have you been, or are proceedings pending in which you may be,

- a. Charged with or convicted of any crime other than a traffic infraction (including military proceedings)? Yes \_\_\_ No \_\_\_
- b. Sanctioned or held in contempt by any court? Yes \_\_\_ No \_\_\_
- c. Subject to an order of protection issued against you? Yes \_\_\_ No \_\_\_
- d. Suspended, removed or asked to resign from any assigned counsel plan or attorney for the child panel? Yes \_\_\_ No \_\_\_
- e. Notified that you are a subject as a parent or person responsible for the care of a child of any indicated report to the Statewide Central Register of Child Abuse and Maltreatment? Yes \_\_\_ No \_\_\_
- f. Notified by an attorney grievance committee that you are the subject of any complaint or disciplinary proceeding or that you are the subject of any professional discipline? Yes \_\_\_ No \_\_\_

- g. Denied a professional or occupational license, or been cautioned, admonished or censured by a licensing authority, or resigned a professional or occupational license, or had an occupational or professional license revoked or suspended?  
Yes \_\_\_ No \_\_\_
- h. Found civilly liable in an action involving fraud, misrepresentation, theft or conversion?  
Yes \_\_\_ No \_\_\_
- i. Discharged in bankruptcy? Yes \_\_\_ No \_\_\_
- j. Found liable for unpaid money judgments, liens or judgments of foreclosure?  
Yes \_\_\_ No \_\_\_
- k. Found liable for civil penalties for unpaid taxes? Yes \_\_\_ No \_\_\_
- l. In default in the performance or discharge of any duty or obligation imposed by a judgment, decree, order or directive of any court or governmental agency?  
Yes \_\_\_ No \_\_\_
- m. Removed as a fiduciary by a court of competent jurisdiction for misconduct?  
Yes \_\_\_ No \_\_\_
- n. In forfeiture of a bond? Yes \_\_\_ No \_\_\_
- o. Found to have committed an ethical violation as a member of a judicial, executive or legislative branch of government?  
Yes \_\_\_ No \_\_\_

**If you answered YES to any of the questions above, you must attach a separate sheet of paper and explain your answer in detail, giving all relevant dates.**

11. Waiver of Confidentiality

I authorize the Committee of Professional Standards of the Fourth Judicial Department, or any other judicial department or grievance committee, to share information about me as an attorney with the Office of the Attorneys for Children in the Fourth Department.

12. While this application is pending, and if this application is accepted, I understand that I am under a continuing duty to advise the Attorneys for Children Program promptly if circumstances occur that would change my answers to question 10.

13. I understand Section 7.2 of the Rules of the Chief Judge and will conform to its requirements.

14. I have read the appeals section of the Guidelines for Attorneys for Children in the Fourth Department (available at <http://www.nycourts.gov/courts/ad4/AFC/AFC-guide.html>) and will follow said Guidelines.

15. I understand that I must have billing records sufficient to justify charges on my AFC vouchers. If accepted onto the Attorneys for Children appeals panel, I will familiarize myself the Appeals Voucher Q & A (available at <https://www.nycourts.gov/courts/ad4/AFC/Appeals/Appeal-QA.pdf>).

I certify that the information contained in this application is true and correct.

Date: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

Mail application **with required attachments** to Jennifer McLaren, Esq., Deputy Director, AFC Program Office, 50 East Avenue, Rochester, NY, 14604. Incomplete applications will not be considered.