MINIMUM REQUIREMENTS FOR
GUARDIAN AD LITEM/ ATTORNEY FOR MINOR CHILD/
CHILD REPRESENTATIVE
APPOINTMENT LIST

In order to be listed as a GAL/ AFC/ Child Representative, all applicants shall at a minimum meet the following requirements and obtain approval from the Office of the Presiding Judge of the Domestic Relations Division.

1. Submit a completed application provided by the Office of the Presiding Judge of the Domestic Relations Division. The application shall be completed under oath and notarized.

2. Be licensed to practice law in the state of Illinois.

3. Have a majority of practice in the area of family law or child welfare or child advocacy for a minimum of five (5) of the last eight (8) years.

4. Possess significant experience in custody and visitation litigation or possess equivalent experience.

5. Submit to an inquiry regarding all areas of the applicant’s past and current profession and/or employment, and have no serious disciplinary actions pending.

6. Be interviewed regarding qualifications by the Domestic Relations’ Division Screening Committee.

7. Attend and complete all required training programs and agree to attend Continuing Legal Education programs for the representation of children.

8. Submit a current biography sheet in the format prepared by the Office of the Presiding Judge of the Domestic Relations Division.

9. Agree to handle a reasonable number of matters representing children on a pro bono basis.

10. Submit to other background checks, if requested.

11. Have tried a custody case (first or substantial second chair experience) or equivalent experience.

12. An attorney on the approved list shall have and maintain appropriate errors and omissions insurance coverage and shall be required to present proof of said insurance, upon request, to the court.
APPLICATION FOR THE
CHILD REPRESENTATIVE/GUARDIAN AD LITEM/ATTORNEY FOR MINOR CHILD
APPOINTMENT LIST

The following information is requested of you in order to ensure quality representation of minor children in matters before the Domestic Relations Division in the Circuit Court of Cook County. Please answer the following questions.

You may be required to update your answers or provide further information to become eligible or maintain eligibility for appointment as a Child Rep/ GAL/ AMC in the Domestic Relations Division.

1. Name: ____________________________________________________________

2. Business Address, Telephone Number and Email:
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

3. Home Address and Telephone Number:
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

4. Language(s) in which you are conversant/fluent: ________________________

5. College or University from which you received your:
   Undergraduate degree: ____________________________________________
   Date Received: ________________________________________________
   Law Degree: _________________________________________________
   Date Received: ______________________________________________
   Other: ______________________________________________________
   Date Received: ______________________________________________

6. Date of Admission to the Illinois Bar: ________________________________
   Years of full-time practice: From: ____________ To: _________________
   Years of part-time practice: From: ____________ To: ________________
Other states in which you are licensed to practice law: ________________________

Date(s) of admission: ______________________________________________________

7. Percentage of practice currently devoted to Domestic Relations’ matters and approximate number of cases:

________________________________________________________________________

Other areas of practice and approximate number of cases:

________________________________________________________________________

Experience in related fields:

________________________________________________________________________

8. Please indicate your custody litigation experience as follows: (You may attach an additional sheet if necessary).

Number of custody cases you have tried to final adjudication as first chair: __________

    For each case please list the name of the case, case number, the judge and opposing counsel:

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Number of custody cases you have tried to final adjudication as second chair: _________

For each case please list the name of the case, case number, the judge and opposing counsel:

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Please describe your experience as a second chair:

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Number of contested temporary custody hearings you have conducted: _________

Please describe your experience working with, preparing, questioning or cross-examining mental health professionals (at deposition, hearing, trial, or during trial preparation):

_______________________________________________________________________

_______________________________________________________________________

_______________________________________________________________________

9. Please describe personal and/or professional experience with children:

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_______________________________________________________________________

_______________________________________________________________________

10. Have you ever been appointed to represent a minor child in contested litigation? If so, please explain:

_______________________________________________________________________

_______________________________________________________________________
11. Please list (case name and number) of three recent Domestic Relations’ cases in which you have represented a party to the litigation:

For each case please list the name of the case, case number, the judge, opposing counsel, and any expert witnesses:

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__________________________________________________________________________
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12. Please list all law firms with which you have been associated or other legal employment, and list the dates of your association or employment:

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13. Please list any bar organizations, professional associations, etc. (related to the field of Domestic Relations) in which you are an active member. Please describe your activities with those groups and the dates of involvement:

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__________________________________________________________________________
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14. Have you previously submitted an application to the CR/GAL/AMC appointment list and been denied? If so, describe your efforts to obtain further Domestic Relations experience, relevant bar activities and/or continuing legal education events in which you have participated prior to your application?

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15. Have you ever been a party litigant in any lawsuit? If so, please explain:

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16. Have you ever been subject to any disciplinary action by any bar association, agency, or other licensing authority beyond a letter of complaint? If so, please explain.

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17. Have you ever been held in contempt by any court? If so, please explain in detail, including the name of the judge, date, and surrounding circumstances of the occurrence.
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18. Are you willing to accept appointments and handle cases on a pro bono basis? ________

19. Please explain why you are interested in and why you believe you qualify for appointment as a Child Representative/ Guardian Ad Litem/ Attorney for Minor Child in the Domestic Relations Division. Please attach an additional sheet if necessary.
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20. Please list the names and phone numbers of three professional references:

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I understand that I am solely responsible for any liability which may arise from my appointment as a Child Representative/Guardian Ad Litem/Attorney for Minor Child. I certify that I have and will maintain appropriate errors and omissions insurance coverage.

I hereby authorize the Administrators of the Attorney Registration and Disciplinary Commission and/or the disciplinary and inquiry bodies of any bar association to disclose to the Domestic Relations Division of the Circuit Court of Cook County all information contained in the files of such bodies concerning my present professional status, all complaints which have been made against me, together with the disposition thereof. I expressly waive for use by the Division whatever right I may have to the confidentiality required by Illinois Supreme Court Rule 766 with respect to the foregoing information.

_________________________________________________

Signature

Date

Subscribed and sworn to before me on this __________ day of ________________,________.

Notary Public:
CIRCUIT COURT OF COOK COUNTY, ILLINOIS,
DOMESTIC RELATIONS DIVISION

CHILD REPRESENTATIVE AGREEMENT

I, the undersigned, understand and acknowledge that it is not a right but a privilege to be placed on the Court-Approved Child Representative List (“List”). I understand and acknowledge that if I am approved to be placed on the List I may be temporarily suspended from the List, permanently removed from the List and/or rescreened by the Child Representatives Screening Committee at the discretion of the Presiding Judge of the Domestic Relations Division of the Circuit Court of Cook County.

I further acknowledge that I have and will continue to maintain appropriate errors and omissions insurance coverage and shall present proof of said insurance, upon request, to the court.

Date: __________________________

Attorney No.___________________

Name:_____________________________________________________________

(Printed)

Signed: __________________________________________________________