

## Grays Harbor County Department of Public Defense Attorney Application

Firm Name:			
Attorney Name:		WSBA #:	
Physical Address:			
Mailing Address:			
Phone Number:			
After Hours Phone:			
E-mail address:			

**Courts of interest:**  District Court  Juvenile Court  Superior Court

I am familiar with, qualified under, and agree to abide by the Washington State Bar Association (WSBA) Standards for Indigent Defense Services, Grays Harbor County (GHC) Department of Public Defense (DPD) procedures, and I have reviewed said standards in preparing this submission of statement of qualifications. [https://www.wsba.org/docs/default-source/legal-community/committees/council-on-public-defense/standards-for-indigent-def-services-boh-apprv-9-22-11.pdf?sfvrsn=dae43cf1\\_2](https://www.wsba.org/docs/default-source/legal-community/committees/council-on-public-defense/standards-for-indigent-def-services-boh-apprv-9-22-11.pdf?sfvrsn=dae43cf1_2)

**Pursuant to the WSBA Standards for Indigent Defense Services, Standard 14, I am qualified for trials in the following types of cases:**

- Adult Felony Cases – Class A
- Adult Sex Offense Cases
- Adult Felony Cases – All other Class B Felonies, C Class Felonies, Probation or Parole Revocation
- Adult Felony Cases – All other Class B Felonies, C Class including violent offenses
- Persistent Offender (Life Without Possibility of Release)
- Juvenile Cases – Class A
- Juvenile Cases – Classes B and C
- Juvenile Sex Offense Cases
- Gross Misdemeanor and Misdemeanor Cases
- Civil Commitment Cases RCW 71.05
- Therapeutic Court  Mental Health Court  Drug Court

**I have attended the following CLEs in the prior year:**

Date:	Topic:	# of Credits:

**I am currently court appointed on the following GHC Superior Court cause numbers:**


**I have Superior Court felony indigent defense contracts in the following counties:**


YES/NO	I am a current member of the following associations:
	Grays Harbor County Bar Association (GHCBA)
	Washington Defender Association (WDA)
	Washington Association of Criminal Defense Lawyers (WACDL)
	National Association of Public Defense (NAPD)
	National Legal Aid & Defender Association (NLADA)
	<b>Other:</b>
	<b>List-Serves Name:</b>

YES/NO	During the last 12 months:	
	<b>I have used a private investigator.</b>	<b># Times:</b> <input type="text"/>
	Private Investigator Name:	PI Contact Information:
	<b>I have used a court language interpreter.</b>	<b># Times:</b> <input type="text"/>
	Court Language Interpreter Name:	Specify Language:

**I agree to:**

- Provide a copy of professional liability certificate of insurance, and general liability certificate of insurance with Grays Harbor County listed as an additional insured.
- Submit quarterly indigent defense standards certifications to the Department of Public Defense;
- Keep and submit detail time records for fee payment to the Department of Public Defense;
- Provide thirty (30) days written notice to end contract to the Department of Public Defense; and
- Transfer remaining pending cases to the substituting appointed counsel with a transfer memo for new counsel, and provide a copy of the transfer memo to the Department of Public Defense.

**Print Name:** \_\_\_\_\_

**WSBA#:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_