



**CIRCUIT COURT
NINETEENTH JUDICIAL CIRCUIT
LAKE COUNTY, ILLINOIS**

18 North County Street
Waukegan, Illinois 60085-4359
847.377.3600
TDD 847.360.2975

The Chambers of
CHARLES W. SMITH
Circuit Judge

October 30, 2020

Instructions for Application for Approval to Serve as a Member of the Family Child Representatives and Guardian Ad Litem List pursuant to 750 ILCS 5/506

These instructions and the attached Application are for use by qualified attorneys in connection with the Local Court Rule 4-3.07 and 750 ILCS 5/506 regarding the Nineteenth Judicial Circuit Family Child Representatives and Guardian Ad Litem 2020-2022 list. If you are interested in being added to the Child Representative and Guardian Ad Litem list, you must submit all of the documents below by **December 4, 2020**. NOTE: FAILURE TO SUBMIT YOUR APPLICATION IN A TIMELY MANNER WILL RESULT IN YOUR NAME NOT BEING ON THE LIST UNTIL 2022, NO EXCEPTIONS.

In order to be added to the Child Representatives and Guardian Ad Litem list please submit the following by December 4, 2020:

1. Child Representatives and Guardian Ad Litem Application
2. 2-Day Child Representatives and Guardian Ad Litem training
3. Current State of Illinois Professional License
4. Current malpractice insurance
5. Documentation of completion of 10 hours of continuing education in the past 2 years

You are required by Local Court Rule 4-3.07 (D) (6) to accept two pro bono appointments annually to remain on the Child Representatives and Guardian Ad Litem list. Individuals interested in being approved as a member of the list should send a completed application form and all attachments required. Applications and the documentation listed above will only be accepted via email to Unnikue Edwards (FamilyJA@lakecountyil.gov) in order to expedite the process. If you have any questions, call 847-377-3727 or email the address above.

For further information, please refer to the Local Court Rules of the Nineteenth Judicial Circuit on the website www.19thcircuitcourt.state.il.us/ and 750 ILCS 5/506 for the most current requirements. Thank you for your continued interest in the 19th Judicial Circuit's Child Representative and Guardian Ad Litem Program.

Sincerely,

Charles W. Smith
Presiding Judge Family Division

11. Training: List training you have received in the past two years in the areas of child development; roles of guardian *ad litem* and child representatives; ethics in child custody cases; relevant substantive state, federal and case law in custody and visitation, allocation of parental responsibilities and parenting time; family dynamics including substance abuse, domestic abuse and mental health issues. Please include names, location of training, dates of training, hours completed, date completed, instructor(s) and type of certification received (if any). If available, please attach a course of syllabus and certificate of completion. In lieu of a syllabus and certificates, an affidavit listing the above information may be submitted with your application.

12. Date admitted to the Illinois Bar: _____

13. Date admitted to any other Bar: _____

14. Years of practice in Illinois: _____

15. Member in good standing with the Illinois Bar? Yes No

16. I have have not been subject to any disciplinary action by the ARDC beyond a letter of complaint. (If you have, please explain on a separate sheet.)

17. I have have not been held in contempt of court by any court. (If you have, please explain on a separate sheet.)

18. For the past _____ years, a majority of my practice has been in the area of family law.

Type of Issue	Number of Trials/Hearings	Number of Settlements	Number of Mediations/Arbitrations
Allocation of Parental Decision			
Allocation of Parental Responsibility			
Relocation			
Abuse: Physical and/or Sexual			
Abuse: Alcohol and/or Substances			

Type of Issue	Number of Trials/Hearings	Number of Settlements	Number of Mediations/Arbitrations
Write others below:			

19. I have handled cases involving child custody, allocation of parental responsibility.

OR

I will work with a mentor who has in excess five years' or more experience in child custody cases for at least two assignments.

20. I have have not tried or been involved in cases where the issues included relocation of a child.

21. I have have not tried or been involved in cases involving physical or sexual abuse of children.

22. I do do not speak another language. If so, what language _____

23. Their is is not someone in my office that can translate for me if sent a case of another language. If so, what language _____

24. I have have not completed 10 hours of continuing legal education courses in the areas of practice required by Illinois Supreme Court Rule 906 (c)(1), and said course was last completed on _____.

25. I understand that I must periodically attend additional child related courses in order to maintain my eligibility for appointment in child custody and visitation cases.

26. I understand that I may occasionally be appointed in cases involving indigents and agree to provide my legal services at a reduced fee or pro bono if such an appointment occurs.

27. I certify that I am currently covered by professional liability insurance which would cover any and all claims against me arising out of my legal services as a child representative or guardian *ad litem*. I agree to maintain such coverage as long as I remain on the appointment list.

I respectfully request that the Court review my application, and if I am found to be qualified and eligible under the applicable local Rule; that I be placed on the Court's list of approved mediators.

Dated ____/____/____

Signature of Applicant

Verification by Certification

I, _____, have read the foregoing Application for
Name of Applicant

Child Representative and have knowledge of the contents thereof, including the Exhibits attached thereto, and under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct.

Dated ____/____/____

Signature of Applicant

CONSENT FOR BACKGROUND CHECK

The Nineteenth Judicial Circuit Court has my consent to conduct a criminal record check as a requirement of my Application for Child Representative/Guardian Ad Litem 506 Referral List.

Name (Please Print): _____

Maiden Name (If Applicable): _____

Date of Birth (mm/dd/yyyy): _____

Gender: _____

Signature: _____ Date: _____

WAIVER, RELEASE AND INDEMNIFICATION OF CLAIMS

WHEREAS, the Nineteenth Judicial Circuit has agreed to accept individuals as members of the Child Representative/Guardian Ad Litem 506 Referral List for the purposes of providing legal services in child custody and visitation cases referred from the Family Division;

WHEREAS, I have been accepted by the Nineteenth Judicial Circuit as a member of the Child Representative/Guardian Ad Litem 506 Referral List;

WHEREAS, I, as a Child Representative/Guardian Ad Litem 506 Referral List member, am required to participate in assignments as directed by the Nineteenth Judicial Circuit;

NOW THEREFORE, I, hereby, in consideration of my acceptance by the Nineteenth Judicial Circuit as a Member of the Child Representative/Guardian Ad Litem 506 Referral List, do release and waive any and all claims or demands of any nature whatsoever, which I have now or may in the future acquire, against the Nineteenth Judicial Circuit Court together with the officers, agents and employees of the Nineteenth Judicial Circuit, resulting from my service as a Member of the Child Representative/Guardian Ad Litem 506 Referral List.

I further covenant and agree, in consideration of my placement and acceptance as a Member of the Child Representative/Guardian Ad Litem 506 Referral List, to indemnify and hold harmless said Nineteenth Judicial Circuit Court, their officers, Agency and employees from any liability, which may be incurred by them, or any of them, proximately resulting from and acts by me during such Child Representative/Guardian Ad Litem 506 Referral List assignments.

I further represent that I understand all risks involved and agree that this waiver, release and indemnification of claims shall be binding upon my heirs, executors and administrators.

Signature: _____ Date: _____