

**IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT  
LAKE COUNTY, ILLINOIS**

**Application for Probate Court Appointments**

I, \_\_\_\_\_, after being duly sworn, upon my oath state as follows:

1. I am a licensed attorney in the State of Illinois and in good standing with the Attorney Registration and Disciplinary Commission.
2. I am qualified by reason of my education, training and/or experience to act as **guardian ad litem** or appointed counsel in one or more of the following types of cases (*Check all that apply*):
  - Guardian ad litem** for minors in guardianships. (I represent that I have certification under **Supreme Court Rule 906** to serve in cases involving custody/visitation disputes);
  - Guardian ad litem** for disabled adults in guardianships;
  - Advocate counsel for disabled adults in contested guardianships;
  - Guardian ad litem** for minors/disabled adults in personal injury settlements;
  - Guardian ad litem** for minor/disabled adult beneficiaries in decedent's estates.
3. I hereby 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 **guardian ad litem** or appointed counsel in the areas set forth in paragraph 2. I agree to maintain such coverage as long as I remain on the probate court appointment list.
4. I understand that I must submit a petition for fees, and that the Court must approve fee requests and determine which parties or individual are responsible for payment of fees. I further understand that I may occasionally be appointed in cases involving indigents, and I agree to provide my legal service pro bono if such an appointment occurs.
5. I will serve the following communities without charge for travel time:  
\_\_\_\_\_  
\_\_\_\_\_
6. I hereby certify that all of the statements contained herein are within my own personal knowledge, and I hereby apply for appointments in probate court cases in the areas set forth in paragraph 2 herein.

*Attorney Name:* \_\_\_\_\_

*Firm:* \_\_\_\_\_

*Address:* \_\_\_\_\_

*City, State, Zip:* \_\_\_\_\_

*Phone Number:* \_\_\_\_\_

*ARDC Number:* \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
*Notary Public*