CLERMONT COUNTY MUNICIPAL COURT Application for Appointment as Assigned Counsel (Attorney Qualifications pursuant to OAC 120-1-10)

Attorney Name:	
Address:	
Telephone #:	Fax #:
Email Address:	
Attorney registration #:	Date of Admission:
Multilingualyesno	o. If yes, language(s) spoken:
·	which you qualify and wish to receive appointments.
7 11	sent indigent clients in misdemeanor and felony cases requirements listed in each category.
attorney or have a minimum of six	el must have at least one year of experience as an x hours of continuing legal education in criminal uccessfully completed a clinical education program
Misdemeanor OVI: counse legal education in OVI practice ar	el must have a minimum of six hours of continuing nd procedure.
Felony OVI: counsel must education in OVI practice and pro	have a minimum of six hours of continuing legal ocedure.
experience in criminal law. Traini	elonies: counsel must have at least one year of ng: within two years prior to appointment, have a nuing legal education in criminal practice and
criminal law AND within six years counsel in at least one criminal ju	unsel must have at least one year of experience in spreceding appointment, experience as lead trial ry trial OR as co-counsel in at least two jury trials. appointment, have a minimum of twelve hours of sinal practice and procedure.

experience in lead trial cou OR as lead o Training: wi	n criminal law AND within ten y unsel in two criminal jury trials, a counsel in one felony jury trial a	ounsel must have at least three years of ears preceding appointment, experience t least one of which involved felony charged as co-counsel in two additional jury trial ent, have a minimum of twelve hours of e and procedure.	ges
ADULT APP	PEALS		
counsel mus have a minin practice and	t have at least one year experience num of six hours of continuing leading to the continuing t	degree felonies: In lieu of required training nce as an attorney. Training: counsel magal education in criminal or appellate completed a clinical education program	
as an attorne or appellate	ey or have a minimum of six hou	must have at least one year of experience irs of continuing legal education in crimin successfully completed a clinical educati	al
	emeanor OVI appeals: counsel egal education in OVI practice ar	must have a minimum of six hours of nd procedure.	
appointment appointment category who	of counsel. I have checked the under these standards. I will no ere I do not meet the above req	ead and understand the requirements for categories for which I am eligible for tify the Court if an appointment is made i uirements. I understand I may be reques nt, as well as, my malpractice insurance.	n a
Date	Printed Name	Signature	
	Please return this	completed form to:	
	Court Adr	Municipal Court	

Batavia, OH 45103 (513) 732-7911 tsellars@clermontcountyohio.gov