

Utah Office of Guardian ad Litem
Utah Private Attorney Guardian ad Litem Program

Application for Participation



Standing in the Shoes of the Child

Please Note: Due to the nature of the position to which you are being considered, both criminal and DCFS background checks are required. Convictions and/or reported findings of abuse or neglect can be used to disqualify you when the specific circumstance indicates that the services of the applicant would be manifestly inconsistent with the scope and substance of child representation and the PGAL Program.

Deliver Application to:
Private Attorney Guardian ad Litem Program
Utah Office of Guardian ad Litem
450 South State Street, N31
P.O. Box 140241
Salt Lake City, UT 84114-0241
OR:
kathryn1b@utcourts.gov

APPLICATION FOR THE PRIVATE ATTORNEY GUARDIAN AD LITEM PROGRAM

Applicants Full Name: _____ Date: _____

Utah State Bar#: _____

Office Address: _____ Phone: _____
_____ Cell Phone: _____

Email Address: _____

Have you ever been arrested or convicted for any crime (excluding minor traffic citations)?
Yes _____ No _____

If you answered "yes", provide the following information:

Approximate Date	Police Agency Charge	Disposition
_____	_____	_____
_____	_____	_____

In connection with my application for being eligible to participate in the Private Attorney Guardian ad Litem Program, which involves working with children, I hereby authorize the Utah Office of Guardian ad Litem to have a certified copy of my past and present work, education and law enforcement records, to ascertain any and all information which may be pertinent to my qualifications to act as a Private Attorney Guardian ad Litem. I do hereby release the Utah Office of Guardian ad Litem, its employees, agents, and personnel from any liability or damages arising out of the applicant furnishing such information. I further agree that a copy of this release shall function as an original.

I hereby certify that all statements made on this form are true and complete. I understand that any miss-statement of material facts will subject me to disqualification. I understand that making a false written statement on this form may constitute a violation of Utah State law 76-8-504 (written false statement), and prosecution for a Class B Misdemeanor could result.

Signature in full

Date

UTAH PRIVATE ATTORNEY GAL PARTICIPATION AGREEMENT

I, _____, hereby attest to and agree to the following conditions of participation and eligibility for case assignment as a private attorney guardian ad litem under UCA Section 78A-2-705 and Rule 4-906 of the Utah Rules of Judicial Administration:

1. I am a member in good standing of the Utah State Bar (bar # _____) and actively practiced law for a minimum of six (6) months (if not, projected date: _____).

2. I will submit letters of recommendation from two (2) experienced Utah law attorneys attesting to my ability and proficiency in taking on the role of a private attorney guardian ad litem (e.g., working with children, litigation and negotiation skills).

3. In order to be considered for participation in the private attorney guardian ad litem program and eligibility to be assigned cases therein, I submit myself to being evaluated at any time at the discretion of the Office, particularly in regard to, but not limited to, conduct or behavior inconsistent with or contrary to the Office's mission or Best Practice Guidelines, or for failure to perform in a competent, professional, ethical, or appropriate manner. I submit to any information the Office may obtain from judges, attorneys, service providers, parties, etc. who have interacted with me in relation to my willingness and/or ability to perform as a private attorney guardian ad litem. I agree to conduct myself in accordance to the mission of the Office, adhere to the Office's Best Practice Guidelines as are applicable to district court cases, and to adhere to Rule 14-301, Standards of Professionalism and Civility, Rules Governing the Utah State Bar.

4. I agree to submit to the Office of Guardian ad Litem **a certified copy of a DCFS Child Abuse Data Base report and like data base of any state in which I have resided**, and submit to the judgment of the Director of the Office of the Guardian ad Litem as to whether any information referenced therein makes me ineligible for appointment.

5. I agree to submit to the Office of Guardian ad Litem **a certified copy of a BCI criminal background report** and submit to the judgment of the Director of the Office of the Guardian ad Litem as to whether any offenses or convictions referenced therein make me ineligible for appointment.

6. I agree to complete any and all initial and any continuing training requirements established by the Office of Guardian ad Litem or that may be requested of me by the Office of Guardian ad Litem. The current requirement, pursuant to Rule 40906 is for 3 CLE hours to be completed every calendar year. These three hours must be obtained by completing the training provide or approved by the Office of Guardian ad Litem.

7. I agree to accept or maintain at least one **pro bono** PGAL case annually.

8. I understand that participation in the PGAL program is subject at all times to the absolute discretion of the Director of the Office of Guardian ad Litem. I agree to be removed from consideration as a private attorney guardian ad litem or from the participation list of eligible PGALs in the event of conduct or behavior inconsistent with or contrary to the Office's mission and Best Practice Guidelines, the Utah State Bar's Standards of Professionalism and Civility, or for failure to perform in a competent, professional, ethical, or appropriate manner as determined by the Office.

Dated this _____ day of _____, 20____

Signature

