LAW OFFICE OF THE HAMILTON COUNTY PUBLIC DEFENDER
Wm. Howard Taft Law Center, 2nd Floor, 230 East Ninth Street, Cincinnati, OH 45202
Phone: 513-946-3700 Fax: 513-946-3707

JUVENILE PANEL ATTORNEY REGISTRATION
Please Print

Name: _____ Supreme Court No. _____ Year Admitted _____

Mailing Address: _____

Office Address: _____

Contacts: Office: _____ Fax: _____ Cell: _____

Email: _____ Home: _____

I hereby agree to notify the Law Office of the Public Defender in writing of any change in my contact information, liability insurance, and/or in my personal or professional status that would affect my qualifications to serve as appointed counsel.

I understand that my participation as a panel or contract attorney is at the discretion of the Public Defender. My participation may be terminated at any time. Any misrepresentation or undisclosed change to the following information may result in my immediate removal.

I hereby agree that pursuant to Regulation III (5) Insurance Compliance, that while accepting any appointed counsel assignments in Common Pleas Court, Juvenile Court, or Municipal Court that I will retain and maintain malpractice insurance of at least $100,000 per occurrence and $300,000 aggregate. Further, I agree to provide a copy of Insurance Declaration page to the Office each and every year. My current malpractice insurance carrier is: Carrier _____ Policy No.: _____

EXPERIENCE

(1) I have practiced juvenile law in Hamilton County for _____ years and as a lawyer for a total of years.

(2) During the course of my legal career, I have obtained the following juvenile delinquency experience:

_____

_____

_____

_____

_____

_____

Please check all that apply.

1. **Misdemeanor and Status Offenses: Where the case involves a child alleged to be unruly, truant, in violation of a court order, or delinquent by reason of committing an act that would be a misdemeanor if committed by an adult, within two years prior to the appointment you have:**

   (☐) Completed a minimum of six hours of continuing legal education, certified by the Ohio Supreme Court commission on continuing legal education, in juvenile delinquency practice and procedure, OR

   (☐) Successfully completed a clinical education program focusing on juvenile law; OR

   (☐) At least one year of experience as an attorney

2. **OVI Cases: Where the case involves a child alleged to have committed an OVI offense, or a case in which OVI is an element, within two years prior to the appointment, you have:**

   (☐) Completed a minimum of six hours of continuing legal education, certified by the Ohio Supreme Court commission on continuing legal education, focused on OVI practice and procedure.

   (☐) At least two years of experience as an attorney

3. **Felonies of the Third, Fourth or Fifth Degree: Where the case involves a child alleged to be delinquent by reason of committing an act that would be a felony of the third, fourth, or fifth degree if committed by an adult, within two years prior to the appointment, you have:**

   (☐) Completed a minimum of twelve hours of continuing legal education, certified by the Ohio Supreme Court commission on continuing legal education, in criminal practice and procedure, at least six of which must be in the area of juvenile delinquency practice and procedure; AND

   (☐) At least one year of experience as an attorney practicing in the area of juvenile delinquency law.

4. **Felonies of the First and Second Degree: Where the case involves a child alleged to be delinquent by reason of committing an act that would be a felony of the first or second degree if committed by an adult, within two years prior to the appointment, you have:**

   (☐) Completed a minimum of twelve hours of continuing legal education, certified by the Ohio Supreme Court commission on continuing legal education, in criminal practice and procedure, at least six of which must be in the area of juvenile delinquency practice and procedure; AND

   (☐) At least two years of experience as an attorney practicing in the area of juvenile delinquency law; AND

   (☐) Within ten years preceding the appointment, prior experience as lead trial counsel in at least two bench trials in juvenile court, at least one of which involved a felony-level charge, or as lead counsel in one felony bench trial and as co-counsel in two additional bench trials

5. **Bindover and Serious Youthful Offender (SYO): Where a petition to transfer to common pleas court or a motion for bindover proceeding has been filed, or where a serious youth offender proceeding has been initiated, you have:**

   (☐) Within two years prior to the appointment, completed a minimum of twelve hours of

continuing legal education, certified by the Ohio Supreme Court commission on continuing legal education, in criminal practice and procedure, at least six of which must be in the area of juvenile delinquency practice and procedure; AND

(_☐_) The requisite experience under O.A.C 120-1-10 to be appointed to a juvenile case based upon the highest degree of the charge in the case; AND

(_☐_) The requisite experience under O.A.C. 120-1-10 to be appointed to an adult case based upon the highest degree felony charged; or co-counsel who meets the adult-case training and experience requirements must also be appointed.

6. **Murder or Aggravated Murder Cases: Where the case involves a child alleged to be delinquent by reason of committing murder or aggravated murder without specifications, without a motion to bind over, and without a serious youthful offender proceeding, you have:**

(_☐_) Within two years prior to the appointment, completed a minimum of twelve hours of continuing legal education, certified by the Ohio Supreme Court commission on continuing legal education, in criminal practice and procedure, at least six of which must be in the area of juvenile delinquency practice and procedure; AND

(_☐_) At least three years of experience as an attorney practicing in the area of juvenile delinquency law; AND

(_☐_) Within ten years preceding the appointment, prior experience as lead trial counsel in at least four bench trials in juvenile court, at least three of which involved a felony-level charge, or as lead counsel in three bench trials, two of which involved a felony-level charge, and as co-counsel in three additional bench trials

7. **Based on the above questions I am qualified to represent juveniles on the following cases:**

(_☐_) Misdemeanor and Status Offenses
(_☐_) OVI and OVI Related Offenses
(_☐_) Felonies of the Third, Fourth or Fifth Degree
(_☐_) Felonies of the First or Second Degree
(_☐_) Bindover and SYO Cases
(_☐_) Murder and Aggravated Murder Cases

Expectations of Panel Attorneys

1. **The Law Office of the Hamilton County Public Defender considers Juvenile Delinquency to be a specialty area of law practice. Accordingly, panel attorneys are expected to be competent in all areas related to Juvenile Delinquency and Juvenile Defense work. Attorneys should be familiar with the Local Juvenile Rules, the Ohio Rules of Juvenile Procedure, the applicable sections of the Ohio Revised Code, and remain up-to-date on all relevant case law.**

2. **Depending on the level of offense that you are deemed qualified for, you are expected to be competent in the following area of this specialty:**
   a. **Competency**
   b. **Educational issues**
   c. **Placement options and criteria**
   d. **Juvenile Sexual Offender Registration (JSOR)**
   e. **Expert resources available**
   f. **Bindover Proceedings**
   g. **Serious Youth Offender Specifications**
   h. **Collateral consequences associated with adjudication**

3. **You are expected to maintain regular contact with your client as well as their parent or guardian. This includes meeting with your client at the detention center, your office, their residence, or another location.**

4. **You are required to attend any mandatory training(s) or meetings sponsored by the Law Office of the Hamilton County Public Defender unless your absence is approved by the Director.**

5. **When contacted by Hamilton County Public Defender administrative staff about an assignment, you are expected to respond by the close of business that day to accept the assignment. If you do not respond by close of business that day, the administrative staff will contact the next person in the rotation.**

6. **You are expected to be punctual.**

7. **You must complete and submit vouchers in an accurate and timely manner.**

8. **If you leave the panel rotation and/or withdraw from a case, case files must be returned to the Director.**

I would like to participate in the mentoring program either as a mentor (__☐__) or a mentee (__☐__).

I understand that vouchers are to be submitted 30 days of case termination and that each voucher must be accompanied by an executed affidavit of indigency in order to receive payment. Failure to submit the voucher in timely fashion will result in a 50% reduction in the fee. Please check: I understand __☐__.

I am/have been the subject of an ethical/grievance/disciplinary/contempt proceeding in connection with my professional license. Please check: True __☐__ False__☐__. If true, please attach a detailed explanation of the proceedings and outcome.

I agree to make myself available to have my picture taken to be maintained in an inter-office directory of panel and contract attorneys. Please check: I agree __☐__.

I have been provided a copy and have read the Standards, Guidelines, and Regulations of the Law Office of the Hamilton County Public Defender and by my signature below do hereby agree to adhere to same. **Please check:** I agree __☐__.

I have read and understand the Attorney Qualifications established for appointed counsel as set out O.A.C. 120-1-10 and agree that I am in compliance with the training and experience listed therein. **Please check:** I understand __☐__

Attached to this REGISTRATION, I am submitting the required documentation (see below)

- Copy of letterhead/lease verifying location of law office
- Copy of Continuing Legal Education (CLE) transcript indicating hours completed
- Copy of Insurance Policy Declarations page verifying amount and nature of professional liability insurance
- Verification of current active registration status with the Ohio Supreme Court.

_____
Name (please print)

_____ _____
(Signature) (Date)

Approved for:

(_☐_) Misdemeanor and Status Offenses
(_☐_) OVI and OVI Related Offenses
(_☐_) Felonies of the Third, Fourth or Fifth Degree
(_☐_) Felonies of the First or Second Degree
(_☐_) Bindover and SYO Cases
(_☐_) Murder and Aggravated Murder Cases

_____ _____
(Signature) (Date)