

**Application for Probate Court Appointments**

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

- I. 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 the current rate of compensation for legal services as guardian ad litem or appointed counsel is per local order, and that the Court must approve fee requests and determine which parties or individuals 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 services pro bono if such an appointment occurs.
5. 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.

SUBSCRIBED AND SWORN to before me this  
\_\_\_\_\_ day of \_\_\_\_\_ " 20 \_\_\_\_

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

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

\_\_\_\_\_  
*[Winnebago] [Boone] County Attorney Number*  
Please circle one

04/2009