APPLICATION FOR APPOINTMENT TO THE OFFICE OF ASSOCIATE JUDGE

PURSUANT TO RULE 39 OF THE SUPREME COURT OF ILLINOIS, I HEREBY SUBMIT MY NAME AS A CANDIDATE FOR APPOINTMENT TO THE OFFICE OF ASSOCIATE JUDGE OF THE CIRCUIT COURT OF THE FIFTH JUDICIAL CIRCUIT.
(Enter "Cook" or Circuit Number)

Please print or type application. Use additional pages when necessary to provide complete answers to questions.

PART A: PERSONAL BACKGROUND

1. (A) Name _____
(Last) (First) (Middle)

(B) Maiden or other name(s) by which you may have been known: _____

2. ARDC Number _____

3. (A) Date of Birth _____ (B) Place of Birth _____

4. Home Address _____
(Street) (City) (County) (Zip) (Telephone)

5. Business Address _____
(Street) (City) (County) (Zip) (Telephone)

6. List previous addresses within the past ten years (include dates):

Home	Business
_____	_____
_____	_____
_____	_____

7. (A) If you hold a current Illinois Driver's License or Secretary of State Identification card, please enter number: _____

(B) Enter name of any other state(s) in which you have ever been licensed to drive a vehicle: _____

(C) Has your driver's license ever been suspended or revoked? □ Yes □ No
(If yes, please attach an explanation)

8. Do you have any family relationships, including family members within the third degree of relationship, which could cause a conflict of interest with your position as an associate judge?

□ Yes □ No

If yes, please explain below: (Canon 3 of the code of Judicial Conduct, Supreme Court Rules.)

9. Are your currently in default on the repayment of a state educational loan? □ Yes □No
(Public Act 85-827 requires a person who owes $600 or more for six months or more to make satisfactory repayment arrangements with the guarantor of the loan.)

10. Are you currently in default on the payment of child support? □ Yes □ No

11. Military Service (Duty with federalized National Guard unit should be reported as "active duty.")

	Branch	Dates	Highest Rank Attained	Type of Discharge
Active Duty Service				
Reserve Service				
National Guard Service				

PART B: HEALTH

Notice to applicants: If you require an accommodation because of a physical or mental disability in order to participate in any phase of the application process, please make that fact known to the Chief Judge of the Circuit which is accepting applications. All information received regarding such requests and accommodations made will be treated confidentially.

1. Are you presently consuming alcohol or other drugs, including prescription drugs, to the extent that such consumption would interfere with your ability to serve on the bench? (If yes, explain below, or attach additional pages, if necessary.)

□ Yes □ No

2. Have you violated any criminal laws of the United States or any state pertaining to the possession, use or sale of illegal drugs? (If yes, explain below, or attach additional pages, if necessary.)

□ Yes □ No

3. Have you violated any criminal laws of the United States or any state pertaining to driving under the influence of alcohol, drugs, intoxicating compound, or any combination thereof or other similar offense? (If yes, explain below, or attach additional pages, if necessary.)

□ Yes □ No

4. The essential functions of an associate judge include, among other things, the ability to sit or remain in one place for extended lengths of time, to conduct court proceedings in an orderly fashion, to remain alert while concentrating on the presentation of evidence and arguments, to evaluate the credibility of witnesses, to comprehend and rule upon factual and legal questions and to discharge the administrative duties attendant to the position. Are you able to perform the essential mental and physical functions of an associate judge with or without reasonable accommodation?
(If no, explain below, or attach additional pages, if necessary.)

□ Yes □ No

PART C: EDUCATIONAL BACKGROUND

1. (A)

	Name of School	Location	Dates	Major	Degrees
High School					
College (s)					
Law School (s)					

(B) List Honors, Awards, Law Review, and other activities or achievements.

2. Continuing Education attended in the last five years. (Such as seminars, symposia, lectures, or legal meetings, specifying if you participated as a speaker, lecturer, panelist, etc.)

Type	Your Participation	Topic

3. Complete the following if you have ever taught any law courses.

School (s)	Date(s)	Subject(s)	Position Held	Current Status

4. If you have written any articles, texts, treatises, handbooks or other writings on legal matters which have been published, please complete the following:

Complete Citation	Publisher	Date	Title	Subject Matter	Co-authors

5. Describe any non-legal teaching or lecturing you have performed:

School(s)	Date(s)	Subject(s)	Position Held	Current Status

6. Bar Associations and Activities

List all national, state, local, specialty, honorary and other bar associations or other legal societies to which you now belong or have belonged.

Association	Office Held/Dates	Current or Past Member

PART D: PROFESSIONAL, BUSINESS AND OCCUPATIONAL BACKGROUND

1. Professional Qualifications

(A) Date you were admitted to practice law in Illinois _____

(B) Length of time you have practiced law in Illinois _____

(C) Length of time you have practiced law in the circuit in which you are seeking judicial appointment. _____

(D) If you have been admitted to practice and/or actively practiced law in another state, please complete the following:

State(s)	Court(s)/Administrative Agency	Currently Licensed	Actively Practicing

2. Practice/Employment

List, in reverse chronological order, the history of your practice or employment since your graduation from law school, whether law related or not.

Dates To From	Name of Firm, Company or Institution	Address (City/State)	Your Status Solo, Partner, Associate or Title Within Organization	Type of Practice/ Nature of Work

3. If you have been engaged in the practice of law, indicate the approximate percentage of time devoted to the following types of practice. ("Litigation" includes, in addition to actual time in court or tribunal, preparation therefore. "Court" indicates federal and state judicial system; "Trib" indicates quasi-judicial tribunals, e.g. Industrial Commission, NLRB hearings, etc.; "Non-Lit" indicates practice not involving litigation.)

Type of Practice	Litigation Court %	Litigation Other Trib. %	Non-Lit %
Anti-Trust & Trade Regulation			
Bankruptcy			
Chancery			
Corporate and Securities			
Criminal (Felony)			
Criminal (Misd./Traffic)			
Environmental			
Family Law			
Labor Relations			
Patent			
Probate & Estate Planning			
Real Estate			
State & Local Government			
Tax (Federal)			
Tax (State, Local)			
Tort (Personal Injury)			
Tort (P.D., Subrogation)			
Worker's Compensation			
Other:			
Other:			

4. (A) Jury Trial Experience (Please state your jury trial experience in actual or approximate numbers.)

	Jury Cases to Verdict		Jury Cases Started But Which Did Not Go to Verdict	
	Civil	Criminal	Civil	Criminal
As Lead Trial Counsel				
As Counsel Assisting at Trial				

(B) List the last two jury cases tried to verdict, during the past five years, including names of other attorneys and Judge.

	Case One	Case Two
Name of Case		
Case Number		
County		
Judge		
Attorney(s)		

5. Non-Jury Trial Experience (Please state in actual or approximate numbers.)

		Civil	Criminal
(A)	Number of contested Non-Jury cases commenced		
(B)	How many of these cases went to judgment after the trial on the merits?		

6. Appellate Practice

(A) How many cases have you personally handled as counsel on appeal? _____

(B) How many cases have you orally argued? _____

(C) List the five most significant cases you have personally handled as counsel on appeal, including citation.
(If case argued by yourself, place check indicated.)

	√ If Argued Yourself

IF APPELLATE COURT DISPOSITION WAS BY RULE 23 ORDER, PLEASE ATTACH COPIES OF ORDERS, IF YOU HAVE THEM.

7. List any elective public office you have held.

Office	Location	Period of Service

8. List any appointive public office you have held:

Office	Location	Dates To/From	Duties	√ Either Column	
				Part-Time	Full-Time
				☐	☐
				☐	☐
				☐	☐

9. Non-Law Related - Professional and Occupational Background

(A) List all professional or occupational licenses (other than law) which you have held.

License	Issuing Authority	Date(s)	(Please √ if license is still current)
			☐
			☐
			☐
			☐

(B) If any such license has ever been revoked or suspended, or if your conduct has been the subject of other discipline or complaint to the licensing authority or its disciplinary body, state fully the facts, circumstances and the disposition.

10. List, in reverse chronological order, any business interest you, or your spouse, now have, or have had in the past, excluding securities in a publicly traded corporation and any interest previously disclosed in this application.

Name of Business	Type of Business	Your or Spouse's Relationship to Business (i.e. Directorship)	Date(s) To/From

11. Have you individually, your spouse, or any business with which you have been affiliated, declared bankruptcy?

(If yes, state details below.) □ Yes □ No

PART E: PROFESSIONAL AND PERSONAL CONDUCT

1. (A) Has your license or right to practice before any state or federal court, agency, or other tribunal ever been denied, revoked or suspended? □ Yes □ No

If yes, state the facts and circumstances fully. (Attach additional pages, if necessary.)

(B) Have you ever been formally censured, adjudged or held in contempt or otherwise disciplined by any judge, court, agency or other tribunal? □ Yes □ No

If yes, state the facts and circumstances fully. (Attach additional pages, if necessary.)

(C) Has your professional conduct or ability been the subject of comment, favorable or unfavorable, in a written opinion of any judge, court, or other tribunal? □ Yes □ No

If yes, state the facts and circumstances fully. (Attach additional pages, if necessary.)

2. To your knowledge, has your professional conduct or ability been the subject of any criticism or complaint filed with or made to the Attorney's Registration and Disciplinary Commission of Illinois or to any similar authority of any other court or state?

□ Yes □ No If yes, state the facts and circumstances fully, including the disposition.
(Attach additional pages, if necessary.)

3. To your knowledge, are you now the subject of any investigation by any governmental or professional authority?

□ Yes □ No If yes, state the facts and circumstances fully.
(Attach additional pages, if necessary.)

4. Have you ever pleaded guilty to or been convicted of a felony or misdemeanor?

If yes, please complete the following: (Attach additional pages, if necessary.)

Court	
Case Number	
Your Attorney's Name, Address, Phone	
Type of Offense	
Additional Information Concerning Facts and Circumstances of Offense	
Disposition, Including Supervision	

5. Have you ever been a party to, or otherwise personally involved in, any litigation (other than as counsel?)

□ Yes □ No

If "yes", please complete the following:

Court	Case Number	Case Name	Your Attorney or Counsel Name/Address/ Phone	Atty. Representing Interest Adverse to Yours	Nature of Case	Disposition

6. Have you, individually, or in connection with any business with which you were associated, failed to file, in an accurate and timely manner, any federal or state income tax return (or supporting documents) which has resulted, or may result, in the imposition of criminal penalties? (If yes, give details)

□ Yes □ No

7. Have you, within the preceding five years, filed a Statement of Economic Interests pursuant to the Illinois Governmental Ethics Act or Supreme Court Rule? (If yes, attach a copy of the most recent Statement filed with each agency.)

□Yes □ No

PART F: PERSONAL AND JUDICIAL REFERENCES

1. Provide the following information on at least four lawyers not associated with you in the practice of law or in business who have knowledge regarding your character and ability.

Name	Address	Phone & Email Address	Relationship (e.g. Friend)	Length of time known to you
1.				
2.				
3.				
4.				
5. (Optional)				

2. Provide the following information on at least one personal reference who has adequate opportunities for observing your professional and general conduct and ability.

Name	Address	Phone & Email Address	Relationship (e.g. Friend)	Length of time known to you
1.				
2. (Optional)				
3. (Optional)				
4. (Optional)				
5. (Optional)				

3. Provide the following information for at least three, but not more than five, judges before whom you have appeared recently in matters which would afford them an opportunity to observe your professional conduct and ability.

Name of Judge	City	Phone & Email Address	Name of Case
1.			
2.			
3.			
4. (Optional)			
5. (Optional)			

PART F: ADVERSARY REFERENCES

1. Complete the following information for lawyers who have represented adverse positions in matters handled by you in the past five years. There are two categories, litigation and non-litigation. Do not list the name of a lawyer in one category if that name is listed in the other. If you have had multiple matters with a listed lawyer, indicate that fact by checking the column provided and state the name of the most recent, or most significant, case or transaction handled with that lawyer.

(A) Litigation Matters

Name of Lawyer	Address/City	Phone & Email Address	Name of Case	Approx. Date	√If Multiple Cases
1.					☐
2.					☐
3.					☐
4.					☐
5. (Optional)					☐

(B) Non-Litigation Matters

Name of Lawyer	Address/City	Phone & Email Address	Name of Case or Description of Transaction	Approx. Date	√If Multiple Cases
1.					☐
2.					☐
3.					☐
4.					☐
5. (Optional)					☐

PART G: ADDITIONAL INFORMATION

1. List any special professional, occupational or other experiences you have had, not otherwise listed in this application, which you believe would assist in the evaluation of your application.

2. As an applicant or candidate for any judicial or other office, have you been screened by any court, bar association, law enforcement agency or any other group or organization? ☐ Yes ☐ No

   (If yes, please state the office, organization, date and bar poll rating, if any, below or attach additional pages, if necessary.)

   kjldkfjsldkfjsldk

3. You may list any civic, philanthropic, community, social or public service organizations in which you have been involved during the past ten years, including any posts or offices held, and honors or awards received.

4. State below, or on a separate attachment, any additional information or observation which you believe would assist the court in its evaluation of your application for appointment by the court.

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION CERTIFICATION AND WAIVER

I hereby certify that I am registered as an attorney under Supreme Court Rule 756, and my fees are paid. I have also reviewed the requirements of Rule 3.15 of the Illinois Code of Judicial Conduct of 2023, and I am prepared to comply with its disclosure requirements.

I authorize the Administrator of the Attorney Registration and Disciplinary Commission to disclose to the Circuit Court of the FIFTH Circuit, or to any screening committee designated by the Circuit Court of the FIFTH Circuit, all information contained in the files of the Attorney Registration and Disciplinary Commission concerning my present status, any complaints which have been made against me, and the disposition of those complaints. I expressly waive whatever right I may have to the confidentiality of that information required by Supreme Court Rule 766 and by any other statute, rule or regulation providing for the confidentiality of that information by the Attorney Registration and Disciplinary Commission.

I do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the Illinois State Police, whether the said records are of a public, private, or confidential nature. I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release and authorization will be considered in determining my suitability for appointment as associate judge. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information. I further release the Illinois State Police from any and all liability which may be incurred as a result of collecting such information. A photocopy of this form will be as valid as an original thereof, even though said photocopy does not contain an original writing of my signature.

I certify that all statements made in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I hereby certify that I meet the eligibility requirements in Article VI, §11 of the I llinois Constitution and Supreme Court Rule 39 (Appointment of Associate Judges).

_____
Signature of Applicant

_____
Date Signed

_____
Email Address

PRINT FORM

RESET FORM