

MAINE COMMISSION ON INDIGENT LEGAL SERVICES

Application for Serious Violent Felony Assignments

Name: _____ Bar Number: _____

1. Do you have at least two years of criminal law experience?
Yes _____ No _____ How many? _____ year(s) _____ months

If your answer to (1) is no, please provide information explaining the need for a waiver and your experience and qualifications to provide representation for individuals charged with a serious violent felony despite your lack of the required years of criminal law experience.
(may attach additional sheets if necessary)

2. Have you tried before a judge or jury as first chair at least four criminal or civil cases in the last ten years? Yes _____ No _____ How many? _____
- a. Were at least two of these cases tried before a jury? Yes _____ No _____ How many? _____
Name the Court and approximate date(s) for at least two of the jury cases:
- b. Were at least two of these cases criminal trials? Yes _____ No _____ How many? _____
Name the most serious charge of these criminal cases:

- c. If your answer to any part of question (2) is no, please provide information explaining the need for a waiver and your experience and qualifications to provide representation for individuals charged with a serious violent felony despite your lack of the required trial experience. *(may attach additional sheets if necessary)*

3. Please outline your reasons for interest in and qualifications for representing individuals charged with a Serious Violent Felony. *(may attach additional sheets if necessary)*

4. If you seek a waiver from any specific requirements, please submit three (3) letters of reference from attorneys with whom you do not practice that describe your qualifications to represent individuals charged with a serious violent felony. These letters of reference must be submitted directly to Executive Director John Pelletier by the author.

Please provide the names of the attorneys who will be submitting letters on your behalf:

1. _____
2. _____
3. _____

Applicant's Signature

Date

Please submit this application to MCILS by email, fax, or mail:

mcils@maine.gov • Fax 207-287-3293
MCILS, 154 State House Station, Augusta, ME 04333-0154