NOMINATION QUESTIONNAIRE SIXTEENTH JUDICIAL CIRCUIT PROBATE COURT COMMISSIONER

1.	Full Name:		
	Social Security Number:		
2.	Missouri Bar Enrollment Number:		
3.	All other names under which you have worked:		
4.	Office address: City/State/Zip:		
	Telephone:		
5.	Residential address:		
6.	Place of Birth:		
7.	Length of residence in Missouri: Length of residence in Jackson County, Missouri:		
8.	Are you a qualified voter in Missouri?		
9.	Citizenship:		
10.	Marital Status:		
11.	If your spouse or children are employed or engaged in any business, state their names and the name and address of their employer or the business in which they are engaged:		
12.	Do you have any outside responsibilities, which might conflict with the position? If so, please specify:		
13.	Education: List all colleges and universities attended and degree(s) earned: Undergraduate College/School:		
	Degree earned:		
	Legal:		
	Class standing:		

Have you ever served in the midischarge, if any:	ilitary?	If so, state branch, rank, type
Have you ever held judicial off If yes, state the courts involved		lidate for judicial office?
		<u> </u>
full-time judicial or quasi-judic	cial officer, give d cted or appointed,	mediator, an arbitrator or a part-tin ates and details, including the cour periods of service and a description
full-time judicial or quasi-judic agencies involved, whether ele your assignments at each court	cial officer, give d octed or appointed, or agency.	mediator, an arbitrator or a part-tin

21. List all places of employment by name and address with which you have been associated in practice, and all governmental agencies or private business organizations which you

FIRM	ADDRESS	DA
possess, and a ger	ntline of your current practice, including any leganeral description of your typical clients. Additionerent now than previously, please provide details	onally, if your prac
Do you ragularly	appear in the Probate Division of the Circuit Co	uurt of Jackson Co
, ,	What percentage of your practice in the l	
in that Division? Can you perform		
in that Division? Can you perform	the essential functions required of the Probate C	
in that Division? Can you perform with or without re List all bar associ provide a brief de	the essential functions required of the Probate C	Court Commission
in that Division? Can you perform with or without re List all bar associ provide a brief de	the essential functions required of the Probate C easonable accommodations? ations and legal professional societies of which rescription of your activities in these organizations	Court Commission
in that Division? Can you perform with or without remarks all bar associ provide a brief dedates of any office	the essential functions required of the Probate C easonable accommodations? ations and legal professional societies of which rescription of your activities in these organizations	you are a member s and provide title

аррс 	ointment:
List	affiliations outside of the legal profession:
since	e you had any occupation, business or profession(s), other than the practice of late admission to the Bar?
	e you ever been arrested, pled or found guilty, and/or convicted of a violation of ral law, state law, county or municipal law, regulation or ordinance?
traff	es, provide details, including jurisdiction, case styling and dates. (Do not includic violations for which a fine of \$150 or less was imposed unless it also include sentence or loss or suspension of license):
	e you ever been charged in any civil or criminal proceedings (including municip conduct alleged to have involved moral turpitude, dishonesty or unethical cond
If so	, please provide details, including full case styling:
cond	e you ever been disciplined or cited for a breach of ethics or for unprofessional luct by any court, administrative agency, bar association or other professional go, provide specific details:

-	List and describe any sanctions imposed upon you by any courts for violation of any or procedure or for any other professional impropriety:
	Have you or your professional liability insurance carriers ever settled a claim against for professional malpractice?
I -	f yes, please explain.
v a	List litigation that was not related to the practice of law, not stated above, in which you were a party to or personally involved that was not related to the practice of law. Incall litigation, both state and federal, where you were a litigant, complaining party or witness, with case name, number, and a summary of the nature of the case and disposition:
	Have you filed all tax returns required by federal, state and local laws?
- -	f not, please explain:
_	
I	Do you owe any taxes and/or have any liens or claims outstanding against you by the internal Revenue Service, the Missouri Department of Revenue, Jackson County, or amunicipality (other than those for 2014)?

(ATTACH TAX CLEARANCE FORMS)

an 	d all seminars at which you participated as a speaker:
	ave you complied with all Missouri Supreme Court CLE requirements during eace last five (5) years?
If :	not, explain:
	ate any additional education or experience you believe would assist you in perfore functions of the position:
	ate any achievements or actions you have accomplished, demonstrating your mmitment or affinity to serving as a Probate Court Commissioner:
thi ma (N	ou are requested to furnish the names and <u>complete mailing addresses</u> of no more ree (3) individuals who are familiar with your abilities and personal character that ay contact as references. Please do not list any judge or family member, as a reference Do not ask any Judge or more than three people to write letters of reference out.)
	NAME & TITLE ADDRESS & PHONE
1.	
2.	

have with reference to the scholastic records I may have	o this form, I hereby waive any and all objections and rights I orivacy of any and all police, tax, medical, disciplinary, or we and I authorize the Circuit Court to make whatever inquiries mation it shall desire with respect thereto.
Date	Signature

I declare, under penalty of perjury, that the foregoing is true and correct.