WAYNE COUNTY CIRCUIT COURT FAMILY DIVISION – DOMESTIC

ATTORNEY PROFILE SHEET – <u>MUST BE FULLY COMPLETED</u>			
1.	Name:		Please Print or Type
	Last First	Middle	
	Address:		
	City	State Zi	p Code
2.	Telephone Number ()	_ Fax Number ()	l
	Cellular Phone Number ()	-	
	E-mail Address (Required)		
3.	Tax ID Number	_	
4.	Are you a member in good standing with the State Bar of Michigan Yes [] No []		
5.	Michigan Bar Number P	Year Admitted to	the Bar
6.	a. Name of Liability/Malpractice Insurance Carrier (You must attach "Declaration of Policy") b. Policy Number Amt Renewal Date		
7.	Have you ever been disciplined by the Attorney Grievance Commission? Yes [] No [] (If yes, please enclose an explanation)		
8.	Have you ever been held in contempt of court? Yes [] No [] (If yes, please enclose an explanation)		
9.	a. Are you fluent in a second language? Yes [] No [] (If yes, specify) b. Are you certified in American Sign Language? Yes [] No []		
10.	Are you Criminal Advocacy Program (CAP) Certified? Yes [] No [] (If yes, what year)?		
	Type of assignment sought in Wayne County Circuit Court Family Division-Domestic Check all that apply)		
11.	[]House Counsel PPO []FOC Contempt []Paternity []Military []Paternity Disestablishment []Other		
12.	Describe prior Domestic experience relevant to	assignments you are seekii	ng:

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Please Print or Type

(Please attach a separate sheet if necessary)

Signature _____ Date _____

Return Completed Form and Supporting Documentation to: Third Circuit Court, Case Processing Department, Rm. 770 CAYMC, Two Woodward Ave. Detroit, MI 48226

(Rev. 10/15/19)