



ARIZONA SUPREME COURT COMMITTEES, COMMISSIONS, COUNCILS & BOARDS

APPLICATION FOR MEMBERSHIP

FULL NAME

ADDRESS

PHONE #:

CITY

STATE

ZIP

EMPLOYER

TITLE

OFFICE ADDRESS

EMAIL:

PHONE #:

HOME COUNTY:

ADMITTED TO PRACTICE LAW IN THE STATE OF AZ:

DATE: _____ BAR #: _____

BOARD/COMMITTEE/COMMISSION OF INTEREST (List according to preference):

1.

2.

3.

STATEMENT OF INTEREST

Please provide a brief statement why you are interested in serving on a Supreme Court Board, Committee, Commission or Council. Attach additional sheets as needed.

PROFESSIONAL AND/OR COMMUNITY SERVICE ACTIVITIES (Include date(s) of service and, if applicable, title of office(s) held):

PLEASE LIST THREE REFERENCES (PERSONAL AND/OR PROFESSIONAL):

Name	Phone
Employer	Relationship
Name	Phone
Employer	Relationship
Name	Phone
Employer	Relationship

AFFIRMATION OF ELIGIBILITY:

To your knowledge, have any formal charges of professional misconduct, criminal misdemeanor, or a felony ever been filed against you? Yes () No () **If yes, please attach explanation.**

Is there any possible conflict of interest or other matter that would create problems or prevent you from fairly and impartially discharging your duties as an appointee of the Supreme Court? Yes () No () **If yes, please attach explanation.**

I certify that the facts contained in this application are true and correct to the best of my knowledge. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my qualifications and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damages that may result from furnishing the same to you. Said investigation may include a criminal history investigation pursuant to A.R.S. §41-1750(G)(2).

SIGNATURE / S/ **DATE** _____

OPTIONAL SECTION

The Arizona Supreme Court strives for diversity in its appointments. Therefore, in this optional section, we ask you to consider providing us with information that will help us evaluate our progress in achieving this goal.

<i>RACE/ETHNICITY</i> <i>(Select all that apply)</i>	✓	<i>GENDER</i>	✓
White (Non-Hispanic)		Male	
Asian (Non-Hispanic)		Female	
Hispanic		Decline to State	
American Indian/Alaskan Native			
Native Hawaiian/Other Pacific Islander			
Black (Non-Hispanic)			
Other			
Decline to State			

RETURN COMPLETED APPLICATION AND ATTACHMENTS TO:

Arizona Supreme Court
Human Resources Department
Attention: Blanca Moreno
1501 West Washington, Suite 221
Phoenix, Arizona 85007-3231
bmoreno@courts.az.gov
Office Number: (602) 452-3308 / Fax Number: (602) 452-3652