

**Application for Criminal Justice Act Panel Membership
United States District Court - Northern District of Mississippi**

Please send completed form to the Clerk of Court (address at end of form).

Name _____

Firm Name _____

Office Address _____

Mississippi Bar No. _____

Office Telephone _____

Fax Number _____

Home or Cell Telephone _____

Federal Tax ID Number _____

*Social Security Number _____

*SS# must be provided even if you will be using a Law Firm Employer Identification Number for tax purposes.

EDUCATION:

Type of School	Name of School and Mailing Address	Date Completed
Law School		
College		
College		
Other		

Please use this space to
explain any additional
education
accomplishments (moot
court, clerkship,
internships, externships,
etc.):

DATES OF ADMISSION:

FEDERAL COURT: Northern District of Mississippi _____

FEDERAL COURT: Other (Court and date of adm.) _____

STATE COURT: Mississippi _____

STATE COURT: Other (state and date of adm.) _____

Please use this section to list any other Courts or Bar Associations to which you have been admitted. Please indicate the name of the court or bar and list your admission date for each.

PRIOR CRIMINAL EXPERIENCE (TRIAL AND OTHERWISE):

	FEDERAL COURT	STATE COURT	TOTAL
NUMBER OF CRIMINAL TRIALS			
NUMBER OF CIVIL TRIALS			
NUMBER OF GUILTY PLEAS			
NUMBER OF SENTENCINGS			

Are you familiar with the current FED.R.Crim.P. Yes No

Are you fluent in a foreign language? Yes No

If "YES," please list:

Have you ever declined a CJA Panel assignment from this Court? Yes No

If “YES,” please explain:

Are you familiar with the current Federal Local Rules? Yes No

Please use this space to list information on the three most recent cases in which you have been involved. Please provide the case numbers, locations, and the disposition for each.

List specific examples of how you have applied or utilized Federal Sentencing Guidelines.

Please describe any appellate experience you have including Federal Criminal Appeals and State Appeals.

Please list any courses you have completed on the Federal Sentencing Guidelines, the Bail Reform Act, and any CLE programs you have attended that were sponsored by the FPD.

Please list any CLE programs you have participated in (not already listed above).

Use this space to list references.

Signature: _____ Dated: _____

Please print, sign, and mail to:

**Clerk of Court
United States District Court
Northern District of Mississippi
911 Jackson Avenue East, Ste. 369
Oxford, Mississippi 38655-3622**