

**FORT BEND COUNTY COURT AT LAW NO. 6 AD LITEM**

**APPLICATION AND ATTORNEY PROFILE**

*Please complete all fields listed below prior to returning the form to the County Court at Law No. 6 Probate Auditor at* [*probateccl6@fortbendcountytx.gov*](mailto:probateccl6@fortbendcountytx.gov)

**ATTORNEY’S GENERAL INFORMATION**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Law Firm (if any affiliation): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physical Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SBN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Private Professional Guardian Cert. No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State Bar of Texas Attorney Ad Litem Certificate: \_\_\_\_\_ Yes \_\_\_\_\_\_ No

If yes, date of expiration: \_\_\_\_\_\_\_\_\_\_\_\_\_

Number of years practicing: Probate: \_\_\_\_\_\_\_\_\_\_\_\_01 Guardianship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you Board Certified in Estate Planning and Probate Law by the Texas Board of Legal Specialization? YES / NO If yes, year of certification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any additional Board Certifications you hold: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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State the title and date of the Probate and/or Guardianship CLE programs that you have taken in the last *TWO* years:

1. Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is there other experience the Court should consider?: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list all foreign languages in which you are fluent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ATTORNEY’S PRACTICE INFORMATION**

What percentage of your practice is dedicated to the Estates Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If your Estates Code practice is less than 25%, please list your other practice areas: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many Probate cases have you handled: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many Guardianship cases have you handled: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State the Date, Cause No., and Style of the Probate matter and Guardianship matter you last handled in Fort Bend County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Initial in the space provided below the cases you are qualified and wish to serve on:

\_\_\_\_\_\_\_ Attorney/Guardian Ad Litem List 1 serving in Probate Matters

\_\_\_\_\_\_\_ Attorney/Guardian Ad Litem List 2 serving in Guardianship Matters

\_\_\_\_\_\_\_ Guardian Ad Litem and Attorney Ad Litem on complex Probate Matters

By making the request, I certify that I have performed a substantial amount of probate work in Fort Bend County, and I have the ability to handle difficult and complex probate cases. In addition, I have significant experience with dependent administrations, including temporary estate administrations. I have over 10 years of experience in probate matters or I am Board Certified in Estate Planning and Probate Law.

\_\_\_\_\_\_\_ Guardian Ad Litem and Attorney Ad Litem on complex Guardianship Matters

By making the request, I certify that I have performed a substantial amount of Guardianship work in Fort Bend County, and I have the ability to handle difficult and complex Guardianship cases. In addition, I have significant experience with guardianship administrations. I have over 10 years of experience in guardianship matters or I am Board Certified in Estate Planning and Probate Law.

*If the information on your Attorney Profile Form changes, it is your responsibility to file an updated Attorney Profile Form with the Court.*

You must attach your current resume or curriculum vitae, and if requesting guardianship appointments, a copy of the letter you received from the State Bar of Texas acknowledging that you have completed the Texas Estate Code § 1054.201 four-hour training requirement, commonly referred to as the State Bar of Texas Attorney Ad Litem Certification. It is your duty to keep a current Ad Litem Certificate on file with the Court. When your Ad Litem Certificate expires, you will be removed from the Ad Litem Lists, unless a new Ad Litem Certificate is provided to the Court prior to the expiration date.

I certify I am a member in good standing with the State Bar of Texas and all the information I have provided and included in this Application & Attorney Profile is true and correct. (Please retain a copy for your records).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attorney’s Signature Date

**COURT USE ONLY**: Date Docket Viewed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved for List 1: \_\_\_\_\_\_\_\_ Approved for List 2: \_\_\_\_\_\_\_\_\_