Ohio Seventh District Court of Appeals

Appellate Appointed Counsel

Attorney Application

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| Name: | Attorney Registration No.: |
| Address: | Email: |
| Office Phone: | Cell Phone: |
| Fax: | Date admitted to the bar: |
|  |
| Appointment Types (check all that apply): |
| [ ] Criminal: 1st & 2nd Degree Felony | [ ] Juvenile: 1st & 2nd Degree Felony |
| [ ] Criminal: 3rd Degree Felony | [ ] Juvenile: 3rd, 4th, 5th Degree Felony and Misdemeanor |
| [ ] Criminal: 4th, 5th Degree Felony and Misdemeanor | [ ] Juvenile: Dependent/Abuse/Neglect |
| [ ] Criminal: unclassified Felonies (no death penalty imposed) | [ ] Custody/Termination of Parental Rights |
| [ ] Death Penalty charged or imposed (certified capital case attorney) | [ ] Other (specify): |
| **I am able to take appointments in the following counties:**[ ] Belmont [ ] Carroll [ ] Columbiana [ ] Harrison [ ] Jefferson [ ] Mahoning [ ] Monroe [ ] Noble |
| CertificationI am a licensed Ohio attorney who is currently in good standing with the Ohio Supreme Court. I am qualified to be appointed counsel for the types of cases I have indicated in this application. I agree to notify the Ohio Seventh District Court of Appeals in writing of any changes in personal or professional status that affect my ability or qualifications to serve as appointed counsel for indigent defendants as indicated in this application. I understand that I must submit a complete appointed counsel fee application packet within 30 days of the resolution of the appeal, and that reimbursements and payments may be reduced or denied if the packet is submitted late. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature Date |
| Mail this application to:  | Attorney Jeff Hendrickson, Court AdministratorSeventh District Court of Appeals131 West Federal StreetYoungstown, Ohio 44503 |

Appointment Application 2020