

KING COUNTY BAR ASSOCIATION
Supplemental Questionnaire for Candidates Seeking Appointment
or Election to Judicial Office

COVER SHEET

NAME _____
(Last) (First) (Middle)

Business Address: _____

Telephone: _____

Business Email: _____

Position Sought: By Election _____
By Appointment _____

- _____ _____ Municipal Court
- _____ King County District Court (_____ Division)
- _____ King County Superior Court
- _____ Washington State Court of Appeals, Div.I
- _____ Washington State Supreme Court

PLEASE NOTE: In the process of determining judicial ratings, the Judicial Screening Committee of the King County Bar Association uses the Washington State Governor's Office Uniform Judicial Evaluation Questionnaire and this Supplemental Questionnaire, as well as reference checks, candidate interviews and other sources of information. (See Judicial Screening Rules and Procedures.)

The responses to the following questions on the Washington State Governor's Office Uniform Judicial Evaluation Questionnaire may be disclosed to persons other than the Judicial Screening Committee and, in the case of judicial elections, will be publicly available:

Position Sought, Name, Business Address, Business email
Professional History: #8, 9, 10, 11, 12, 13, 14, 15,
Educational Background: #16, 17
Professional Experience: #18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32
Community and Civic Activities: #33

At various times, groups not affiliated with KCBA have rated judicial applicants. The KCBA Judicial Screening Committee's bylaws preclude the Committee from disclosing the names of applicants seeking a rating for appointment to these other groups. However, if you are interested in obtaining the names and addresses of such other rating groups to request this information yourself, you may contact the Executive Director at the KCBA office, telephone: 206-267-7100.

Include the following materials in your application packet:

- Governor's Office Uniform Judicial Evaluation Questionnaire
- KCBA Supplemental Questionnaire
- A writing sample between 5-10 pages, as requested in question 45 of the Governor's questionnaire.

Please be advised that the Judicial Screening Committee may take into account the information provided in the questionnaire, the reference checks, the interview, and any other source of information available to it. Letters of recommendation will not be provided to the Committee and should not be solicited. Supplemental materials such as journal articles, legal research, motions, briefs or other documents that you have filed in court, other than the writing sample specifically called for in the Governor's Uniform Questionnaire, should not be included.

REFERENCES. The Committee finds it useful to speak with attorneys and non-attorneys who are familiar with you. One or more Committee members will attempt to contact each reference listed. All telephone numbers should be current and legible. You may contact references in advance if you so desire. The Committee may also call upon individuals not listed to obtain information.

(1) List the names and phone numbers of up to ten attorneys who have supervised you or who have reviewed and are familiar with your legal work, including your current supervisor and at least one other supervisor from your current workplace and at least one supervisor from each of your prior workplaces during the past fifteen years.

- a.
- b.
- c.
- d.
- e.
- f.
- g.
- h.
- i.
- j.

(2) For the last five appellate matters in which you participated (whether as lawyer or decision-maker), list as appropriate the following for each: case name, subject matter, court, judge (w/phone number), and opposing counsel or counsel appearing before you (w/ phone number).

- a. Case Name:
Subject Matter:
Court:
Judge:
Plaintiff's Attorney:
Defense Attorney:
- b. Case Name:
Subject Matter:
Court:
Judge:
Plaintiff's Attorney:
Defense Attorney:
- c. Case Name:
Subject Matter:
Court:
Judge:
Plaintiff's Attorney:
Defense Attorney

- d. Case Name:
Subject Matter:
Court:
Judge:
Plaintiff's Attorney:
Defense Attorney

- e. Case Name:
Subject Matter:
Court:
Judge:
Plaintiff's Attorney:
Defense Attorney

I certify under penalty of perjury of the laws of the state of Washington that the above information is true, accurate and complete. I agree to notify KCBA if there are material changes in this information between the time the Uniform Questionnaire and this cover sheet are completed and the expiration of any rating received.

Signature

Print Name

Date

Washington State Bar Association
Office of Disciplinary Counsel
1325 Fourth Ave Suite 600
Seattle, WA 98101

RE: WAIVER AND AUTHORIZATION TO RELEASE INFORMATION

I, _____, WSBA No. _____ have requested rating for
judicial office by the King County Judicial Screening Committee.

Pursuant to ELC 3.4(c) I authorize and request the Washington State Bar
Association, to disclose the record of disciplinary grievances filed against me and the
status of otherwise confidential disciplinary investigations and proceedings and to
provide copies of nonpublic information to the Judicial Screening Committee of the King
County Bar Association, 1200 Fifth Avenue, Suite 600, Seattle, Washington 98101.

Dated this _____ of _____, 20__.

Signature

Print Name

WSBA Number

I _____, WSBA No. _____, decline to authorize the
release of confidential discipline information under RD 11.1(n) to the King County Bar
Association Committee.

Dated this _____ of _____, 20__.

Signature

Print Name

WSBA Number