

**INSTRUCTIONS FOR COMPLETING THE  
QUESTIONNAIRE AND APPLICATION FOR MEMBERSHIP ON THE PANEL & DEVELOPMENT PANEL  
OF PRIVATE ATTORNEYS UNDER THE CRIMINAL JUSTICE ACT PLAN FOR THE  
UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF INDIANA**

1. Please complete all sections of the form.
2. The preferred method of submission for completed forms is via E-mail. Alternatively, you can submit your form by mail by printing your completed form and mailing it to:  
*Sara Varner, 111 Monument Circle, Ste. 3200, Indianapolis, IN 46204.*
3. The membership of the panel and development panel will be reviewed by the District Court Judges, Chief Federal Defender, Monica Foster, and the Panel Selection Committee annually. The minimum annual requirements for retention on any panel are: (1) subscription to the Federal Public Defender Listserv and (2) 6 hours of attendance at CLE programs directed at federal criminal defense within 12-months of appointment to the panel. Attorneys on the panel will be required to annually certify satisfaction of these minimum requirements to remain on the panel.

Additionally, Developmental Panel members will be required to attend additional mandatory CLE sessions provided by the Federal Defenders office and covering the basics of federal criminal defense.

4. If you have any questions about the completion of this form, please contact:  
*Sara Varner at [sara\\_varner@fd.org](mailto:sara_varner@fd.org) or 317-383-3520.*

**QUESTIONNAIRE AND APPLICATION FOR MEMBERSHIP ON THE PANEL &  
DEVELOPMENT PANEL OF PRIVATE ATTORNEYS UNDER THE CRIMINAL JUSTICE  
ACT PLAN FOR THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN  
DISTRICT OF INDIANA**

This questionnaire and application is to be completed by attorneys who wish to apply to represent eligible criminal defendants under the provisions of the Criminal Justice Act Plan adopted by the United States District Court for the Southern District of Indiana, and by those who wish to apply for the Development Panel.

Completed applications can be submitted by e-mail to [sara\\_varner@fd.org](mailto:sara_varner@fd.org). Any questions, please contact Sara Varner, at (317) 383-3520.

<b>1. FULL NAME:</b>	<b>STATE BAR NUMBER:</b>	
<b>2. OFFICE ADDRESS (Including name of law firm):</b>	<b>3. HOME ADDRESS:</b>	
<b>Office Telephone:</b>	<b>Home Telephone:</b>	
<b>Fax Number:</b>	<b>E-mail:</b>	
<b>4. EDUCATION: Name and Address of Law School</b>		
<b>Date of Graduation and Degree Received:</b>		
<b>5. BAR ADMISSIONS -- Admitted to Practice In:</b>		
Supreme Court of Indiana	Date Admitted _____	In Good Standing? Yes
United States District Court, Southern District of Indiana	Date Admitted _____	Yes
United States Court of Appeals for the Seventh Circuit	Date Admitted _____	Yes
United States Supreme Court	Date Admitted _____	Yes
Bar Admission in other Jurisdictions. Please list each court with admission date:		

**6. DISCIPLINARY ACTIONS**

Have you ever been disciplined by any court or commission, including private reprimands?

Yes            No

If yes, please explain in detail the circumstances and the results. Attach a separate sheet if necessary.

**7. PRACTICE BACKGROUND**

(a) Have you ever been employed as a full-time prosecutor, public defender, or law clerk to a judge or justice?

Yes            No

If yes, please describe the position, the name of your employer, and the dates of employment. Attach a separate sheet if necessary.

(b) Have you ever been appointed by this Court to represent an eligible criminal defendant pursuant to the Criminal Justice Act?

Yes            No                    Number of Times \_\_\_\_\_

The United States Court of Appeals for the Seventh Circuit?

Yes            No                    Number of Times \_\_\_\_\_

Any other Court?

Yes            No                    Number of Times \_\_\_\_\_

If yes, please identify the Court and list the approximate year(s) of your appointment(s). Attach a separate sheet if necessary.

(c) Please describe any continuing legal education experience you may have had, either as a lecturer or participant in criminal or trial advocacy programs and/or federal criminal defense programs within the past five years. Attach a separate sheet if necessary.

**8. TRIAL & SENTENCING EXPERIENCE**

(a) Approximately how many felony cases have you tried to verdict in:

United States District Court, Southern District of Indiana  
Indiana State Court  
Other Courts

(b) Approximately how many pleas and sentencings have you handled in:

United States District Court, Southern District of Indiana  
Indiana State Court  
Other Courts

(c) Approximately how many civil cases have you tried to verdict in:

United States District Court, Southern District of Indiana  
Indiana State Court  
Other Courts

(d) Have you had trial experience in a state or federal death penalty case?      Yes      No

If yes, please describe each of the death penalty cases in which you have had trial experience. In addition, please describe any appellate experience you may have had in state or federal death penalty cases, including post conviction relief or habeas corpus proceedings. Attach a separate sheet if necessary.

**9. SPECIAL QUALIFICATIONS**

Please indicate whether you have any special qualifications, such as fluency in a foreign language or expertise in a specialized area of law, e.g., immigration, which you believe the Panel Selection Committee should be aware of in reviewing your application. Attach a separate sheet if necessary.

## 10. LEGAL REFERENCES

Please list no more than five local judges and attorneys familiar with your legal skills. For each reference, list a phone number and e-mail address.

## 11. DECLARATIONS

- (a) I understand that if I am appointed to represent a criminal defendant in any case before the United States District Court for the Southern District of Indiana pursuant to its Criminal Justice Act Plan, the appointment will continue through any appeal that may be taken to the United States Court of Appeals for the Seventh Circuit and to the United States Supreme Court, and any Rule 35 Motion for Reduction of Sentence which may be appropriate following the conclusion of the appeals, as well as any related proceedings that may result from the appellate process, unless relieved from the appointment by Order of Court.

**Yes**

- (b) I have read and am familiar with the Federal Rules of Criminal Procedure, the Federal Rules of Evidence, the Rules of the United States District Court for the Southern District of Indiana, the Indiana Rules of Professional Conduct, and the *United States Sentencing Guidelines Manual* (November 1, 2012 Edition).

**Yes**

- (c) I am willing to accept between two to six CJA appointments annually, and I will only decline a CJA appointment due to a conflict of interest or a then-current case load that would prevent or hinder me from rendering effective representation under the 6th Amendment.

**Yes**

- (d) I understand that to remain on the Panel, I must subscribe to the Federal Defender Listserv and annually attend at least 6 hours of CLE programs focused on federal criminal defense practice. I will be required to annually certify that I have met these requirements.

**Yes**

**12. CIVIC INVOLVEMENT**

Please provide a summary of your community involvement including volunteer activities or board memberships.

**13. OTHER INFORMATION**

Please provide any additional information you believe the Panel Selection Committee should consider when reviewing your application. Attach a separate sheet if necessary.

**14. EXTENT OF REPRESENTATION**

Do you have a preference as to which Division you wish to serve in as a member of the CJA Panel?

Yes            No

If Yes, please indicate your Division preference:    Indianapolis  
Terre Haute  
Evansville  
New Albany

**15. APPLICANT DECLARATION**

I have reviewed the current Criminal Justice Act Plan adopted by the United States District Court for the Southern District of Indiana and agree to be bound by its terms and conditions. I declare under penalty of perjury that the forgoing answers and statements are true and correct.

In the event I am selected for the CJA Panel or Developmental Panel, I agree that I will notify the Chair of the CJA Committee in the event any licensing authority, grievance committee, or administrative body takes any action against me, or reprimand has been issued against me by any state or federal court.

\_\_\_\_\_  
Executed On (Date)

\_\_\_\_\_  
Signature of Applicant (For Email submission, please use s/Name)

**For Selection Committee Use Only**

**MEMBERSHIP:**

Accept for Panel

Accept for Development Panel

Applicant Rejected

**DIVISION ASSIGNMENT:**

N/A

Indianapolis

Terre Haute

Evansville

New Albany

**COMMENTS**

[Empty rectangular box for comments]