

The Supreme Court of Ohio

COMMISSION ON CERTIFICATION OF ATTORNEYS AS SPECIALISTS

BACKGROUND INFORMATION FORM

A separate *Background Form* must be provided for:

- Each member of the governing board or governing committee of the organization;
- Each staff member involved in the operation of the program(s) and who ensure compliance with Gov. Bar R. XIV;
- Each person retained by the governing board or evaluation committee to carry out the program(s); and
- Each person responsible for evaluating the validity and reliability of the written examinations.

The completed forms are to be attached to the *Application for Accreditation*.

INDIVIDUAL INFORMATION

Organization name:

Name:

Address:

Date of birth:

Is this person an attorney? Yes No

If Yes, please list the jurisdictions in which they are admitted and the dates of admission.

If No, how are they qualified to establish and monitor the organization's standards of certification?

Does this person have extensive practice or involvement in the area of specialty for which this Application is being made? Yes No

Is this person a certified specialist in this field of law? Yes No

If Yes, what is the name of the certifying agency and the date of certification?

If No, how has this expertise been determined and verified?

Provide specific details regarding this person's degree of involvement in the specialty area:

I have attached a current curriculum vitae or resume for this person, in satisfaction of Gov. Bar R. XIV, Sec. 3(D)(3).