

8. During the current certification term:	
a. Were you disbarred, suspended or disciplined by the State Bar of California or similar attorney disciplinary authority or any other authority that imposes professional discipline in California, or in another state or jurisdiction, including a foreign jurisdiction, or by any bankruptcy court, or do you have any discipline pending?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Did you have any felony convictions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Did you resign from any bar, court or body before whom you appear?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Were there three or more judgments of professional negligence against you? <i>(If yes, please attach the relevant documents.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Were any sanctions, other than discovery sanctions, entered against you by any court or body before whom you appear?	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Were any findings of contempt made against you by any court or body before whom you appear?	<input type="checkbox"/> Yes <input type="checkbox"/> No
IF YOU ANSWER YES TO ANY OF THE ABOVE, YOU MUST PROVIDE FULL DETAILS ON A SEPARATE SHEET. A record of discipline or failure to disclose any of the information requested above may constitute grounds for denial of your application.	

DECLARATION

I hereby authorize all educational institutions, governmental agencies and instrumentalities (including bar associations and bar examiners of other jurisdictions), employers and business and professional associates (past and present), to release to the State Bar of California Board of Legal Specialization ("CBLS") and/or its agents or advisors any nonprivileged information, files or records requested for the purpose of processing this application. The foregoing release does not apply to matters communicated by me in confidence to any lawyer, spouse, physician, psychotherapist or clergy person for which I have privilege of nondisclosure under the provisions of Chapter 4, Division 8 of the California Evidence Code.

I further authorize the CBLS to conduct independent inquiry and review, including contacting the references I provide and other references within the discretion of the CBLS and agree that neither I nor my agents will seek to review the materials collected during the evaluation of my application.

I agree to pay all fees required by the CBLS.

I agree to abide by all rules and regulations of the CBLS as amended from time to time and to furnish to the CBLS such information as it may require to evaluate my application.

I am the applicant herein for certification as a specialist under the State Bar of California Program for Certifying Legal Specialists. I fully understand that failure to make a truthful disclosure of any fact, item or information required may result in the denial of my application, revocation of my certificate of specialization, or disciplinary action by the State Bar of California. I have carefully read and answered each question completely and truthfully in the foregoing application and any attachments hereto, and certify that the information therein is true and correct to the best of my knowledge.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration is executed on

DATE

TYPE OR PRINT NAME

SIGNATURE

TASK AND EXPERIENCE REQUIREMENT ATTACHMENT A

Applicant Name: _____ Bar Number: _____

The Criminal Law Advisory Commission may require additional evidence of completion of the tasks and experience as indicated in this Attachment A.

If you are using the alternative tasks set forth in the Standards to recertify, complete ATTACHMENT A-2 instead.

For purposes of numbers 1 and 2 below, please note the following:

- “Principal counsel” means an attorney who presents the case or proceeding to the court or jury during its entire course or a substantial part thereof. More than one attorney may be a principal counsel so long as each is involved in the presentation of a substantial part of the case or proceeding.
- Attendance in court during any part of a day shall be counted as attendance for a full day.
- Military courts-martial and trials conducted pursuant to the Lanterman-Petris-Short Act shall not be counted as criminal jury trials.

Within the five years immediately preceding submission of this application, I have:

CHECK THE BOX THAT APPLIES

1. Personally attended a trial court in California or in any United States District Court for twenty-five (25) days as principal counsel of record for a party in a criminal jury trial during the phase of trial commencing at the start of voir dire examination and ending when the case is submitted to the jury or is otherwise earlier concluded.

TITLE OF CASE	CASE NO.	COURT WHERE TRIED	DATE CASE SUBMITTED TO JURY OR VERDICT RENDERED	NUMBER OF DAYS AS COUNSEL

OR

2. Participated in five (5) days of criminal jury trials as specified in #1 above. **IF YOU CHECK THIS BOX, YOU MUST COMPLETE ATTACHMENT A-1.**

OR

3. Presided as a judicial officer for at least sixty (60) days over misdemeanor or felony jury trials or juvenile court proceedings under section 602 of the Welfare and Institutions Code.

TASK AND EXPERIENCE
ATTACHMENT A-2 – Alternative to Criminal Task Requirements

Applicant Name: _____ Bar Number: _____

The Criminal Law Advisory Commission may require additional evidence of completion of the tasks and experience as indicated in this Attachment A-2.

As an alternative to the criminal trial practice task requirements listed in section 6.0 of the Standards, I qualify by showing the following law practice requiring similar skills, as described in section 7.0 of the Standards:

CHECK THE BOXES THAT APPLY AND COMPLETE THE APPROPRIATE SECTIONS BELOW. ATTACH ADDITIONAL SHEETS AS NEEDED. Refer to SECTION 7.0 of the Standards for additional information regarding alternative to criminal trial practice task requirements.

1. I have had substantial involvement in other areas of law practice requiring similar skills as criminal trial practice, such as:

a. Litigation in contested civil matters involving jury trials.

NAME OF CASE	CASE NO.	COURT WHERE TRIED	TYPE OF CASE	DECISION DATE

b. Appellate practice in either criminal or non-criminal matters in proceedings in which decisions after hearing have been reached.

TITLE OF CASE	CASE NO.	COURT WHERE TRIED	NATURE OF PROCEEDING

- c. Practice in a government agency in which the practitioner is engaged in activities substantially equivalent to criminal law practice.

NAME OF AGENCY	CASE NO.	TITLE OF CASE/ACTIVITY	NATURE OF PROCEEDING

- d. Active full-time supervision of criminal trial attorneys, which includes one, or a combination of, the following: charging of complaints, filing of complaints, trial strategy and preparation, appellate review, legal motions, preparation and presentation of in-house training. Please attach a statement detailing how you qualify under his category.

- 2. I have engaged in research, writing and/or special studies of criminal law and procedure.

TITLE OF ARTICLE	WHERE PUBLISHED	DATE PUBLISHED	NATURE OF RESEARCH, TIME SPENT & DATES

- 3. I possess some, but not all, of the criminal trial practice task requirements of section 6.0 of the Standards as listed below. **USE SEPARATE SHEET IF NECESSARY.**

***NEW EDUCATION REPORTING SCHEDULE
ATTACHMENT B**

Applicant Name: _____ Bar Number: _____

The Legal Specialist Education requirement is no longer reported in the recertification application. Attorneys now report their Legal Specialist Education by submitting a Legal Specialization Education Compliance Card. The Compliance Card can be found online at www.californiaspecialist.org under the forms section.

Specialists are required to complete a total of 36-hours of approved education every three years. Compliance Groups and reporting deadlines are listed below:

Compliance Group 1 (Last Name A-G at the time of Admission to the State Bar) 2/1/2019
Compliance Group 2 (Last Name H-M at the time of Admission to the State Bar) 2/1/2021
Compliance Group 3 (Last Name N-Z at the time of Admission to the State Bar) 2/1/2020

Some FAQs about this process:

Does the education reporting period affect my recertification deadline?

No. You will still be due to recertify every five (5) years. **Please do not submit a compliance card with your recertification application**, if you have already submitted a compliance card or if you are not due to report your Legal Specialist Education.

How do I submit my Legal Specialist Education Compliance Card?

Once you have completed and signed the Legal Specialist Education Compliance Card, you can submit it to the Department of Legal Specialization either via mail, fax or e-mail.

Isn't reporting my Legal Specialist Education the same as reporting my MCLE compliance?

No. Your Legal Specialist Education is reported on a compliance card, and your MCLE compliance is reported online on My State Bar Profile.

What if I am certified in more than one specialty?

During your compliance period, you will need to submit a Legal Specialization Education Compliance Card for each specialty. For example, if you are a dual specialist, you will have to submit a compliance card for each area of law in which you are a specialist.

Can I submit my compliance card before my Compliance Group is due to report?

No. Compliance cards will only be accepted for the Compliance Group due to report. Any other compliance cards sent to the Department of Legal Specialization will not be marked as received.

How do I report my education if I was certified after they compliance group period?

You will have a reduced and proportional educational requirement. You will have to report at least 1 hour for each month that you were certified. For example, if your compliance period is from February 1, 2016-January 31, 2019 and you were certified in September 2018, you would have to report at least 5 hours of legal specialist education.

Do I need to send in my certificates of attendance?

No. Please save them for one year after you report your education compliance in the event that you are audited.

For more information, visit the MCLE Requirements for Certified Specialists page on www.californiaspecialist.org for full details, as well as potentially qualifying MCLE substitutions.

INDEPENDENT INQUIRY AND REVIEW ATTACHMENT C

Applicant Name: _____ Bar Number: _____

I submit the names and addresses of the following eight individuals to act as references who can attest to my proficiency in the practice of criminal law: four attorneys who practice in the same geographical area as I do, one judge of a Justice, Municipal or Superior Court within the State of California, or a United States District Court or Federal Magistrate Court, before whom I have appeared as an advocate within the two years immediately preceding application; and three California lawyers with whom I have tried a criminal case but with whom I am not associated.

In addition, I have submitted the names and addresses required under sections 5.1.1 through 5.1.5 of the Standards.

All references, communications, reference forms, and information gathered pertaining to the applicant shall be the property of the State Bar and are confidential and no information concerning them and the matter to which they relate shall be given to any person except upon prior order of the Board of Governors of the State Bar or as provided in the Rules and Regulations.

Include each reference's California bar membership number to insure that reference forms are sent promptly and to the right individual. Bar numbers can be found online at www.calbar.ca.gov under Attorney Search. If the attorney does not have a California Bar number or is a judge, please provide a full address.

NAME AND BAR NUMBER	ADDRESS
1. (attorney practicing in same geographical area)	
2. (attorney practicing in same geographical area)	
3. (attorney practicing in same geographical area)	
4. (attorney practicing in same geographical area)	
5. (Judge or Justice)	
6. (CA attorney with whom I have tried a case)	

NAME AND BAR NUMBER	ADDRESS
7. (CA attorney with whom I have tried a case)	
8. (CA attorney with whom I have tried a case)	
9. (additional attorney)	
10. (additional attorney)	
11. (additional attorney - optional)	
12. (additional attorney - optional)	

ATTACHMENT C (cont.)

In addition to the above references, I submit:

The names and mailing addresses of the opposing counsel, judges and any co-counsel in the last two (2) jury trials I conducted, if any:

NAME AND BAR NUMBER	ADDRESS
1.a.	
b.	
c.	
d.	
2.a.	
b.	
c.	
d.	

ATTACHMENT C (cont.)

The names and mailing addresses of the opposing counsel, judges and any co-counsel in the last two (2) preliminary hearings I conducted, if any:

NAME AND BAR NUMBER	ADDRESS
1.a.	
b.	
c.	
d.	
2.a.	
b.	
c.	
d.	

ATTACHMENT C (cont.)

The names and mailing addresses of the opposing counsel, judges and any co-counsel in the last two (2) writ or appellate matters I conducted, if any:

NAME AND BAR NUMBER	ADDRESS
1.a.	
b.	
c.	
d.	
2.a.	
b.	
c.	
d.	

ATTACHMENT C (cont.)

The names and mailing addresses of the opposing counsel, judges and any co-counsel in the last two (2) administrative hearings I conducted, if any:

NAME AND BAR NUMBER	ADDRESS
1.a.	
b.	
c.	
d.	
2.a.	
b.	
c.	
d.	



CALIFORNIA BOARD OF LEGAL SPECIALIZATION OF THE STATE BAR OF CALIFORNIA

180 HOWARD STREET
SAN FRANCISCO, CALIFORNIA 94105-1617
TELEPHONE: (415) 538-2120
FAX: (415) 538-2180
E-MAIL: legalspec@calbar.ca.gov
WEBSITE: www.californiaspecialist.org

Legal Specialization Recertification Application Credit Card Authorization Form

Attorney Name: _____ Bar Number: _____

Address: _____

City, State, Zip: _____

Telephone: _____ E-mail Address: _____

DESCRIPTION	FEE
Legal Specialization Recertification Application Fee	\$350
Credit Card Payment Processing Fee* (2.25%)	\$7.88
TOTAL	\$357.88

**For credit card payments, a processing fee of 2.25% will be added to all charges. There is no processing fee associated with payments by check.*

This form may not be used to pay dues or other attorney fees; it only may be used to pay fees related to Legal Specialization. **Please print legibly.**

Credit Card Number: _____

Credit Card Security Code: _____ Expiration Date (Month/Year) _____

Credit Card Type: Visa MasterCard Discover American Express

Name on Card: _____

Signature of Card Holder: _____ Date: _____

By my signature on this document, I/we hereby authorize The State Bar of California to charge my/our Visa, MasterCard, Discover, or American Express account for the amount listed in the 'Total' box above.

SUBMISSION INFORMATION

MAIL TO:
The State Bar of California
Department of Legal Specialization
180 Howard Street
San Francisco, CA 94105

OR

FAX TO:
(415) 538-2180