



**The State Bar of California  
Special Master Program**

[www.calbar.org/specialmaster](http://www.calbar.org/specialmaster)

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**Submit by Email:** [specialmaster@calbar.ca.gov](mailto:specialmaster@calbar.ca.gov) or **FAX:** (415) 538-2215

**Application to Serve as a Special Master**

<b>Personal Information</b>
Name:
State Bar Member #:
Date of Admission:
Email Address:
Address 1:
Address 2:
City, State, ZIP Code:
Daytime Phone:
Alternate Phone:
Counties in which you wish to serve as a Special Master:

<b>Qualifications:</b>
By Statute: A special master is an attorney who is an active member in good standing of the State Bar selected from a list of qualified attorneys which is maintained by the State Bar particularly for the purpose of conducting the searches described in Penal Code §1524. Special masters must have been members of the State Bar for at least five years. To avoid potential conflicts of interest, attorneys who devote a substantial amount of time to criminal law practice are not eligible to serve as special masters. Special masters serve without compensation but have the same immunities as public employees of the government entity initiating the search. In selecting special masters, Courts are to make 'every reasonable effort to insure that the person selected has no relationship with any of the parties involved in the pending matter.' Special masters are bound to maintain the confidentiality of the information obtained.
<b><i>Because of the possibility of conflicts of interest, the rules prohibit appointing attorneys employed by the office of a public defender, district attorney, attorney general, law enforcement agency, or certified criminal law specialists, or those who devote a substantial amount of time to criminal law practice.</i></b>

Have you been an active member of the bar for at least five (5) years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you a Certified Criminal Law Specialist?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you currently employed by a public defender's office, a district attorney's office, the Attorney General's office or any law enforcement agency?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you devoted more than twenty-five (25) percent of your practice to criminal law matters during the last year?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will you devote more than five (5) percent of your practice to criminal law matters over the next five (5) years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you been professionally disciplined during the past five (5) years in any court or in any jurisdiction?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you currently under suspension or disbarment in any court or in any jurisdiction?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**Attestation:**

To the best of my knowledge I meet the qualifications to serve as a special master. I declare under penalty of perjury, under the laws of the State of California, that the foregoing and any attachments to it are true and correct.

**Signature**

Name (printed):

Signature:

Date: