



Application for Appointment to Serve on State Bar Committees or External Entities

Introduction

The Board of Trustees of the State Bar of California makes appointments to committees that support the work of the State Bar, and external entities that work in furtherance of the State Bar mission. A complete list of the committees and external entities to which the Board makes appointments can be found [here](#). Additional information about current vacancies can be found [here](#). Please review these resources before applying for an appointment.

Diverse Membership

The State Bar of California values broad-based representation and diversity of membership on the committees, advisory bodies, and other entities to which it makes appointments. The Board of Trustees works to increase diversity in the legal profession and promote diverse representation on these committees and external entities by making appointments that reflect a deep and broad range of perspectives including but not limited to diversity of race, ethnicity, gender, sexual orientation and identity, disability, geographic location, legal practice area, size of law practice, amount of professional experience, and educational background.

The State Bar complies with all applicable antidiscrimination laws in its appointments process.

Application Instructions

- Assemble** application packet in the following order: (1) Application, signed and dated; (2) Resume or biography (5 page maximum); (3) Letters of recommendation (optional, 3 letter maximum).
- Submit** a separate application packet for each committee or external entity to which you are applying. Application packets may be submitted electronically, but all documents must be provided in a single, scanned PDF, organized as directed above, and attached to an email, sent to the email address shown below. If you submit a hard copy of the application, print the documents single-sided and mail to the address shown below.

Appointments Office
The State Bar of California
180 Howard Street, 10th floor
San Francisco, CA 94105-1639
Email: appointments@calbar.ca.gov
Phone: 415-538-2370
Fax: 415.538.2305

Deadline: Unless otherwise published on the State Bar's website, applications must be received no later than: Friday, March 19, 2021.

Application for Appointment to Serve on State Bar Committees or External Entities

Application

NAME:

STATE BAR NUMBER:
(attorneys only)

Check here if you are not an attorney:

Check here if you are an attorney but not admitted to practice in California:

Some committees include public members (nonattorneys). If you are not an attorney and wish to apply for membership on a committee, please review the committee descriptions to determine which committees have public members, and only apply for appointment to a committee that has a vacancy for a public member.

Employer/Firm/Agency: _____

Address: _____

City/State/Zip Code: _____

Daytime Phone Number: _____

Fax Number: _____

Email address: _____

Committee Appointment Sought

<input type="checkbox"/> California Board of Legal Specialization	<input type="checkbox"/> Committee on Professional Responsibility and Conduct
<input type="checkbox"/> Client Security Fund Commission	<input type="checkbox"/> Council on Access and Fairness
<input type="checkbox"/> Commission on Judicial Nominees Evaluation	<input type="checkbox"/> Lawyer Assistance Program Oversight Committee
<input type="checkbox"/> Commission on Judicial Nominees Evaluation – Review Committee	<input type="checkbox"/> Legal Services Trust Fund Commission
<input type="checkbox"/> Committee of Bar Examiners	<input type="checkbox"/> Council on Access and Fairness

External Entity Appointments Sought

<input type="checkbox"/> Judicial Council of California

HOW DID YOU LEARN OF THE VACANCY? (check all that apply)

<input type="checkbox"/> Board of Trustees <i>member (name):</i> _____	<input type="checkbox"/> Bar Association: _____
<input type="checkbox"/> State Bar committee - member <i>(name):</i> _____	<input type="checkbox"/> State Bar website, social media
<input type="checkbox"/> Colleague	<input type="checkbox"/> Other <i>(specify):</i> _____

WHICH ONE OF THE FOLLOWING BEST DESCRIBES YOUR OCCUPATION? (check one; specify if requested)

<input type="checkbox"/> Private sector attorney working in law firm	<input type="checkbox"/> Legal aid attorney
<input type="checkbox"/> Private sector attorney working as in-house counsel	<input type="checkbox"/> Attorney not practicing law <i>(specify):</i> _____
<input type="checkbox"/> Public sector attorney	<input type="checkbox"/> Current/retired judicial officer <i>(specify):</i> _____
<input type="checkbox"/> Law school professor	<input type="checkbox"/> Retired attorney
<input type="checkbox"/> Quasi-judicial officer	<input type="checkbox"/> Other <i>(specify):</i> _____

If you selected "Private sector attorney working in law firm" above, **WHAT IS THE SIZE OF THE FIRM?** (Check one)

<input type="checkbox"/> Solo practitioner	<input type="checkbox"/> 26-50 attorney firm
<input type="checkbox"/> 2-5 attorney firm	<input type="checkbox"/> 51-100 attorney firm
<input type="checkbox"/> 6-10 attorney firm	<input type="checkbox"/> 101-200 attorney firm
<input type="checkbox"/> 11-25 attorney firm	<input type="checkbox"/> 200+ attorney firm

DATE YOU WERE ADMITTED TO THE STATE BAR OF CALIFORNIA (month and year): _____

I am currently (check one): <input type="checkbox"/> Active <input type="checkbox"/> Inactive
List other jurisdictions to which you have been admitted to practice: _____
Not Applicable <input type="checkbox"/>

HOW LONG YOU HAVE BEEN PRACTICING LAW (years and months)? _____

PRACTICE AREAS: _____

CERTIFIED SPECIALIST PRACTICE AREAS: _____

IF YOU ARE NOT AN ATTORNEY, WHAT IS YOUR PROFESSION AND HOW LONG HAVE YOU WORKED IN YOUR PROFESSION *(years and months)*? _____

VOLUNTEER SERVICE. List prior and current volunteer service with the State Bar, the California Lawyers Association, local/affinity/specialty bar associations, community or other organizations. Please focus on activities that prepare you for the committee or external entity to which you are seeking to be appointed.

CALIFORNIA LAWYERS ASSOCIATION. List all sections of which you are a member.

DISCIPLINE RECORD. List any formal disciplinary charges filed against you by the State Bar of California, including the disposition of the charges and any public record of discipline.

STATEMENT OF INTEREST. Please state why you wish to serve on the committee or external entity and what you can contribute that would make you a good candidate for appointment.

EXPERIENCE. Describe any prior experience you have had with the committee or external entity.

ADDITIONAL BACKGROUND. Describe any additional background relevant to your appointment to the committee or external entity, including, but not limited to, how you can contribute to its diversity and broad composition.

OPTIONAL DEMOGRAPHICS. Please assist the State Bar in ensuring diverse membership by answering the following questions.

With which of the following racial and ethnic groups do you identify? (choose all that apply):

<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Middle Eastern or North African
<input type="checkbox"/> White	<input type="checkbox"/> American Indian or Alaska Native
<input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander
<input type="checkbox"/> Asian	<input type="checkbox"/> Other race, ethnicity, or origin (please specify): _____

Which of the following best fits with the gender you identify as? (choose all that apply):

<input type="checkbox"/> Female	<input type="checkbox"/> Gender Variant/Nonconforming/Nonbinary
<input type="checkbox"/> Male	<input type="checkbox"/> Two Spirit
	<input type="checkbox"/> Not listed (please specify): _____

Which of the following best describes you? (choose all that apply):

<input type="checkbox"/> Cisgender (Identify with the gender assigned at birth)	<input type="checkbox"/> Intersex
<input type="checkbox"/> Transgender	<input type="checkbox"/> Not listed (please specify): _____

How do you describe your sexual orientation/identity? (choose all that apply):

<input type="checkbox"/> Lesbian	<input type="checkbox"/> Heterosexual
<input type="checkbox"/> Gay	<input type="checkbox"/> Pansexual

<input type="checkbox"/> Bisexual	<input type="checkbox"/> Asexual
	<input type="checkbox"/> Not listed (please specify): _____

Do you identify as a person with a disability? Yes No

What age group describes you?

<input type="checkbox"/> 18-29	<input type="checkbox"/> 50-59	<input type="checkbox"/> 80 or over
<input type="checkbox"/> 30-39	<input type="checkbox"/> 60-69	
<input type="checkbox"/> 40-49	<input type="checkbox"/> 70-79	

Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?

Yes No

SIGNATURE. Sign and date your application.

Signature: _____ Date: _____
(If you type your name on the signature line, please include the symbol "/s/" to show this is your signature.)

Application Checklist

- ✓ Answer all questions on the application.
- ✓ Attach resume or biography (5 page maximum).
- ✓ Attach optional letters of recommendation (3 letter maximum).
- ✓ Sign and date the application.
- ✓ Submit the application.