



**GRAYS HARBOR COUNTY SUPERIOR COURT
GUARDIAN AD LITEM APPLICATION**

Registry for Which You Are Applying

(check all that apply):

- Title 11 GAL Adult Registry
- Title 11 Minor/Ct Visitor Registry
- Title 13 GAL Registry
- Title 26 GAL Registry
- Settlement GAL Registry
- Title 4 GAL Registry

Type of Application (check one):

- New Application (complete all sections)
- Renewal Application (complete Sections I and VI only and sign –for Title 11 Registries also complete Section III)

I. PERSONAL INFORMATION

NAME: _____
 ADDRESS: _____
 CITY: _____ ZIP CODE: _____
 DAYTIME TELEPHONE: _____
 FAX NUMBER: _____ EMAIL: _____

II. EDUCATIONAL INFORMATION:

LEVEL OF EDUCATION (check highest degree and provide the additional information):

- Bachelor Degree - Year: _____ School: _____
Major: _____
- Master Degree - Year: _____ School: _____
Major: _____
- Juris Doctorate - Year: _____ School: _____
- Other Doctorate - Year: _____ School: _____
Major: _____
- Other - Year: _____ School: _____
Major: _____

III. GAL TRAINING COMPLETED

Please provide the following information:

Completed Title 11 training? Yes No When: _____ Where: _____
 Seminar Video Both (year) (city/state)
 For Renewals Only: Last Annual Training Year: _____ Where: _____

Completed Title 13 training? Yes No When: _____ Where: _____
 Seminar Video Both (year) (city/state)

Completed Title 26 training? Yes No When: _____ Where: _____
 Seminar Video Both (year) (city/state)
 Most recent GHC Local GAL Training: Year: _____

Completed Settlement GAL training? Yes No When: _____ Where: _____
 Seminar Video Both (year) (city/state)

IV. PRIOR GAL SERVICE

Have you been or are you currently on any other county’s guardian ad litem registries? Yes No

If yes, please specify which counties, which registries, and whether you are currently on that registry?

Have you ever been suspended or removed from a registry? Yes No

If yes, please provide a brief description of why you were suspended or removed, the county and registry, and the current status with regard to that registry.

V. EMPLOYMENT INFORMATION

Please list your employers for the last five years:

EMPLOYER	ADDRESS/TELEPHONE	POSITION	FROM – TO
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

VI. CRIMINAL HISTORY

Attach a current criminal background check for each state you have resided in for the last ten years.

Submission of this application does not guarantee that you will be approved for inclusion on any Grays Harbor County Guardian ad Litem Registry.

I certify that I have read the applicable statutes and court rules governing Guardians ad Litem. I declare under penalty of perjury of the laws of the State of Washington that the information provided in this application is true and correct to the best of my information and belief.

Signed at _____ on _____.
(city/state) (date)

Signature of Applicant