

**Panel Attorney Application**  
**Missouri State Public Defender**  
(Please print or type)

Date \_\_\_\_\_ 20\_\_\_\_

Mo Bar# \_\_\_\_\_

Date of Birth \_\_\_\_\_

Attorney Name \_\_\_\_\_ Preferred Name \_\_\_\_\_

Firm Name \_\_\_\_\_ Attorney E-Mail \_\_\_\_\_

Office Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

County \_\_\_\_\_ Phone: Office \_\_\_\_\_ Cell \_\_\_\_\_

Support Staff Name \_\_\_\_\_ E-Mail \_\_\_\_\_

Would you like your support staff to be copied on automated email notifications such as case assignments and expense request approvals? \_\_\_\_\_ Yes \_\_\_\_\_ No

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

If applicable, Second Office located in \_\_\_\_\_ County

Office Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

1. I am licensed and in good standing to practice law in Missouri. \_\_\_\_\_ Yes \_\_\_\_\_ No
2. How long have you been practicing as an attorney? \_\_\_\_\_
3. Do you currently, or have you ever, had a disciplinary action filed against you in the Missouri Supreme Court (or any other state)? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, Case No.? \_\_\_\_\_
4. Have you been disbarred, placed on probation or has your law license ever been suspended in this or any other state? Where? \_\_\_\_\_ When? \_\_\_\_\_
5. Approximately what percentage of your practice involves criminal work? \_\_\_\_\_ %
6. Please list the **counties** from which you are available to take cases.  
\_\_\_\_\_  
\_\_\_\_\_

7. Please indicate the **types of cases** for which you possess the requisite skill and willingness to accept:

**Adult Court:**

\_\_\_\_\_ All felonies, misdemeanors, & all probation violations

\_\_\_\_\_ C/D/E felonies, misdemeanors, & all probation violations

**Juvenile:**

\_\_\_\_\_ All felonies, misdemeanors, & all probation violations

\_\_\_\_\_ C/D/E felonies, misdemeanors, & all probation violations

**Appellate/PCR:**

\_\_\_\_\_ Direct appeals (Please include writing sample.)

\_\_\_\_\_ Post-Conviction Relief motions (Please include writing sample.)

\_\_\_\_\_ Post-Conviction Relief appeals (Please include writing sample.)

**Exclusions:**

\_\_\_\_\_ No Sex cases

\_\_\_\_\_ No Homicide cases

8. How many cases have you tried to a jury as the lead attorney? \_\_\_\_\_

If less than two as lead attorney, how many cases as second chair? \_\_\_\_\_

9. Please list the most recent JURY TRIALS which you have conducted to verdict and, if criminal, indicate whether you represented the defendant or the state:

Date \_\_\_\_\_ Case # \_\_\_\_\_ Defense or Prosecution \_\_\_\_\_

Case-type or Charge \_\_\_\_\_

Date \_\_\_\_\_ Case # \_\_\_\_\_ Defense or Prosecution \_\_\_\_\_

Case-type or Charge \_\_\_\_\_

Date \_\_\_\_\_ Case # \_\_\_\_\_ Defense or Prosecution \_\_\_\_\_

Case-type or Charge \_\_\_\_\_

Date \_\_\_\_\_ Case # \_\_\_\_\_ Defense or Prosecution \_\_\_\_\_

Case-type or Charge \_\_\_\_\_

10. If you wish to be listed as available for **A/B felony** case assignments, please summarize the nature and extent of your experience with such cases:

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11. If you wish to be listed as available for **juvenile** case assignments, please summarize the nature and extent of your experience and/or training with such cases:

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12. If you wish to be listed as available for **sex** case assignments, please summarize the nature and extent of your experience and/or training with such cases with such cases:

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13. If you wish to be listed as available for **homicide** case assignments, please summarize the nature and extent of your experience and/or training with such cases with such cases:

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14. If you wish to be listed as available for **PCR or direct appeal** case assignments, please summarize the nature and extent of your experience and/or training with such cases (and include a writing sample with this application):

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15. Please list two professional references and their contact information:

Name\_\_\_\_\_

Email Address\_\_\_\_\_ Phone\_\_\_\_\_

Address\_\_\_\_\_ City\_\_\_\_\_ Zip Code\_\_\_\_\_

Occupation\_\_\_\_\_ Relationship to Reference\_\_\_\_\_

Name\_\_\_\_\_

Email Address\_\_\_\_\_ Phone\_\_\_\_\_

Address\_\_\_\_\_ City\_\_\_\_\_ Zip Code\_\_\_\_\_

Occupation\_\_\_\_\_ Relationship to Reference\_\_\_\_\_

16. For conflict purposes, please list the other Attorney/s who practice in your firm:

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17. For conflict purposes, please indicate whether you or a family member have ever been a prosecutor or law enforcement officer and, if so, where and when:

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18. For conflict purposes, please indicate whether you or a family member currently hold any county or municipal office and the location. Examples include judge, commissioner, prosecutor, council member, commission member, city or county counselor, etc.:

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19. List additional skills: Fluent in additional languages? American sign language? Specialized criminal training or expertise?

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20. Please provide name and contact information if you know of any other attorneys in private practice who would be interested in being on our panel.

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

MSPD reserves the right in its discretion to deny a panel attorney application, to deviate from the panel attorney case assignment rotation, to reassign a case, to reduce the seriousness of the types of cases assigned to a panel attorney, or to temporarily or permanently remove an attorney from the panel. MSPD provides equal opportunities to all panel attorneys and applicants without regard to race, color, national origin, citizenship or immigration status, sex, pregnancy, gender, gender identity, disability, genetic information, marital status, age, religion, sexual orientation, or status as a covered veteran in accordance with applicable federal, state and local law.

**Please return this form to MSPD Case Contracting Division at:  
Case.Contracting@mspd.mo.gov**

**For contract rates and more information visit our website: [www.publicdefender.mo.gov](http://www.publicdefender.mo.gov)**