

**APPELLATE PROGRAM  
APPLICATION FOR CERTIFICATION**

**BASIC INFORMATION**

1. Name of Applicant \_\_\_\_\_
2. Business Address of Applicant \_\_\_\_\_
3. City/State \_\_\_\_\_ 4. ZIP \_\_\_\_\_
5. Home Address of Applicant \_\_\_\_\_
6. City/State \_\_\_\_\_ 7. ZIP \_\_\_\_\_
8. Telephone No. \_\_\_\_\_ 9. FAX No. \_\_\_\_\_
10. Bar Roll Number \_\_\_\_\_

**GENERAL PRINCIPLES OF CERTIFICATION ELIGIBILITY**

*Please indicate by a check (✓), your assurance that you meet the following eligibility standards:*

\_\_\_\_ Standard 8-1.1. I am familiar with the practice and procedure of the criminal courts of Louisiana and am a member in good standing of the Louisiana Bar.

*OR*

\_\_\_\_ Standard 8-1.1 I am familiar with the practice and procedure of the criminal courts of Louisiana and have been admitted to practice *pro hac vice* in Louisiana.

*AND*

\_\_\_\_ Standard 8-1.2. Within one year of this application for certification, I intend to complete one LIDB-approved appellate training program.

\_\_\_\_ Standard 8-1.3. I intend to maintain my certification by successfully completing every two years from the date of certification a minimum of one LIDB-approved appellate training program.

\_\_\_\_\_  
Signature of Applicant

**ELIGIBILITY CRITERIA FOR APPELLATE COUNSEL  
SENTENCES OF FIVE YEARS OR LESS**

*Please indicate by a check (✓), your assurance that you meet the following eligibility standards:*

\_\_\_\_\_ Standard 8-2.1.(A). I have filed at least one brief in a Louisiana appellate court in a criminal case within the past two years;

or

\_\_\_\_\_ Standard 8-2.1.(B). I have equivalent appellate experience, including filing civil or criminal appellate briefs in other jurisdictions, serving as an appellate law clerk, or other comparable work;

or

\_\_\_\_\_ Standard 8-2.1.(C). I have completed at least one appellate training program approved by the Louisiana Indigent Defender Program.

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Signature of Applicant

**ELIGIBILITY CRITERIA FOR APPELLATE COUNSEL  
SENTENCES OF OVER FIVE YEARS**

*Please indicate by a check (✓), your assurance that you meet the following eligibility standards:*

\_\_\_\_\_ Standard 8-2.2.(A). I have filed at least three briefs in Louisiana appellate courts in criminal cases within the past two years;

or

\_\_\_\_\_ Standard 8-2.2.(B). I have equivalent appellate experience, including filing civil or criminal appellate briefs in other jurisdictions, serving as an appellate law clerk, or other comparable work;

and

\_\_\_\_\_ Standard 8-2.2(C). I am submitting, with this application, one sample of an appellate brief for review by the Louisiana Indigent Defender Board.

\_\_\_\_\_  
Signature of Applicant

**CERTIFICATION REQUIRED BY ALL APPLICANTS**

*Please indicate by a check (✓), your agreement to the following terms:*

I have read, understand, and agree to abide by the following Parts and the applicable Standards contained in this Chapter:

- \_\_\_\_Part IV. Monitoring and Removal, including Standards 8-4.1, 8-4.2, 8-4.3, 8-4.4.
- \_\_\_\_Part V. Number of Attorneys in Felony Appeals, including Standard 8-5.1.
- \_\_\_\_Part VI. Workload, including Standards 8-6.1 and 8-6.2.
- \_\_\_\_Part VII. Standards of Appellate Representation, including Standards 8-7.1 through 8-7.10.
- \_\_\_\_Part VIII. Support Services, including Standard 8-8.1.

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Signature of Applicant