

# California Judicial Mentor Program Application San Joaquin/Stanslaus/Tuolumne/Calaveras

## PERSONAL INFORMATION

FULL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
First Middle Last

HOME ADDRESS: \_\_\_\_\_  
Street Address Apt/Suite  
City State Zip Code

WORK ADDRESS: \_\_\_\_\_  
Street Address Apt/Suite  
City State Zip Code

E-MAIL: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

## COUNTIES OF INTEREST

LIST THE COUNTIES TO WHICH YOU ARE THINKING OF APPLYING IN ORDER OF PREFERENCE:

\_\_\_\_\_  
\_\_\_\_\_

## MENTORSHIP

I REQUEST A MENTOR WITH THE FOLLOWING PERSONAL BACKGROUND, IF POSSIBLE:

RACE/ETHNICITY: \_\_\_\_\_ GENDER: \_\_\_\_\_

SEXUAL ORIENTATION: \_\_\_\_\_ GENDER IDENTITY: \_\_\_\_\_

DISABILITY: \_\_\_\_\_

MENTOR RAISED FAMILY DURING JUDICIAL CAREER: \_\_\_\_\_

**RESUME**

**ATTACH YOUR RESUME AND ANSWER QUESTIONS BELOW THAT ARE NOT INCLUDED IN IT.**

**DESCRIBE BAR ASSOCIATION PARTICIPATION/LEADERSHIP (SPECIALTY BARS/LOCAL/STATE/NATIONAL):**

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**DESCRIBE PRO TEM EXPERIENCE:**

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**DESCRIBE COMMUNITY INVOLVEMENT/SERVICE:**

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**PROVIDE ANY ADDITIONAL INFORMATION YOU WOULD LIKE THE COMMITTEE TO KNOW IN ASSIGNING A MENTOR:**

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**CERTIFICATION**

**I CERTIFY THAT I MEET ALL ELIGIBILITY REQUIREMENTS FOR THE CALIFORNIA JUDICIAL MENTOR PROGRAM, WHICH ARE:**

- I HAVE AT LEAST 8 YEARS OF EXPERIENCE AS A LAWYER IN CALIFORNIA AND HAVE BEEN LICENSED IN CALIFORNIA FOR AT LEAST 8 YEARS
- I AM IN GOOD STANDING WITH THE BAR
- I AM COMMITTED TO PUBLIC SERVICE

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**EMAIL COMPLETED APPLICATION TO: [bak@sjcourts.org](mailto:bak@sjcourts.org)**

**\*\*\*INCLUDE A COPY OF YOUR RESUME**

