

Application for Special Master

(Please print or type)

FULL NAME: _____

BUSINESS ADDRESS: _____

MAILING ADDRESS: _____

(if different) _____

HOME TELEPHONE: _____

OFFICE TELEPHONE: _____ FAX #: _____

SOCIAL SECURITY #: _____

FORMAL EDUCATION

SCHOOL

GRADUATION DATE

DEGREE

DATE ENTERED LAW PRACTICE: _____

STATE BAR NUMBER: _____

COUNTY OF ADMISSION: _____

HAVE YOU HAD AT LEAST 3 YEARS OF LAW PRACTICE? _____

WHAT TYPE(S) OF LAW DO YOU/ HAVE YOU PRACTICE(D)?

SPECIALTY (Circle One): PROPERTY BUSINESS GENERAL

OTHER _____

TRAINING

Have you served as a referee? _____

Have you served as an arbitrator? _____

Have you ever been subject to any disciplinary action professionally?

Yes _____ No _____

(If yes, please explain on a separate sheet of paper.)

Have you ever been charged or convicted with a felony or misdemeanor other than traffic offenses? Yes _____ No _____

(If yes, please explain on a separate sheet of paper.)

I, _____, certify that the information supplied on this application is correct. I understand that all information herein is subject to verification.

Signature of Applicant

Date

Notary Public

Sworn and subscribed before me

This _____ day of _____, 20____

Notary Public, _____ County

My commission expires: _____

*** To satisfy the Special Master qualification of "Good Standing," a current letter of certification of good standing and membership must be issued to the Special Master office by the Georgia State Bar Association.

To obtain a letter of good standing from the Georgia State Bar Association, you must make a written request to:

State Bar of Georgia
104 Marietta Street, Suite 100
Atlanta, Georgia 30303
ATTN: Membership Dept.

Request that the letter be sent directly to the Superior Court Administration- Special Master Program at the address below ***

Special Master Program
Superior Court Administration
ATTN: Jamie Barnes
70 Haynes Street, Suite 2029
Marietta, Georgia 30090-9642