

DELAWARE JUDICIAL NOMINATING COMMISSION

QUESTIONNAIRE FOR CANDIDATES FOR JUDICIAL OFFICE

Revised September 2024

QUESTIONNAIRE FOR CANDIDATES FOR JUDICIAL OFFICE

Please check the appropriate box below:

- Vice Chancellor of the Court of Chancery - I am a judicial officer or an attorney and I am seeking appointment as a Vice Chancellor of the Court of Chancery

- Judge of the Superior Court - I am a judicial officer or an attorney and I am seeking appointment as a Judge of the Superior Court, New Castle County

- Judge of the Family Court - I am a judicial officer or an attorney and I am seeking appointment as a Judge of the Family Court, Sussex County

- Commissioner of the Family Court - I am a judicial officer or an attorney and I am seeking appointment as a Commissioner of the Family Court, New Castle County

- Commissioner of the Family Court - I am a judicial officer or an attorney and I am seeking appointment as a Commissioner of the Family Court, Sussex County

Instructions:

1. You must use the version of the Questionnaire that was supplied on the website. (<https://courts.delaware.gov/career/>) where the Notice of Vacancy for the judicial position you are applying for was posted. Previous versions of the Questionnaire may be rejected.
2. Please provide all information requested and answer all questions completely.
3. Please provide your answers within the Questionnaire. You should only supply attachments for writing samples and the documents requested in Questions 18, 20, and 21.
4. Please provide a copy of your current Resume or Biographical Statement issued by you or with your consent by including it at the end of your Questionnaire.
5. The completed Questionnaire, signed/notarized Waivers, and Resume/Biographical Statement should be saved together as one PDF and named as follows:
Last name, First initial Application (e.g. Doe, J Application).
6. If due to size limitations you are required to break the Questionnaire/Waivers/Resume or Biographical Statement into more than one PDF, please name them as follows:
Last name, First initial Application Part 1 of ____
Last name, First initial Application Part 2 of ____
Etc.
7. Please provide an index of the attachments. The index and all attachments should be saved as a separate PDF(s) and named as follows:

Last name, First Initial Attachment 1 of ___
Last name, First Initial Attachment 2 of ___
Last name, First Initial Attachment 3 of ___
Etc.

8. Please submit your electronic Questionnaire and Attachments via email to JNC@delaware.gov.
9. Please also submit to the Chairman of the Judicial Nominating Commission four (4) printed, bound copies of your Questionnaire and Attachments. The Questionnaire should be organized in the same manner as the electronic version (as noted in paragraphs 5-6 above). Attachments should be bound separately and may be printed double-sided and provided with the Questionnaire.
10. Additional instructions for submission of materials is provided in the Notice of Judicial Vacancy.
11. The Questionnaire asks for the political affiliation of Applicants. How such information will be used is informed by both the Delaware Constitution and by a Stipulated Consent Judgment and Order entered by the United States District Court for the District of Delaware on January 30, 2023. Several courts in Delaware are subject to a “bare majority” requirement. When a particular opening cannot be filled by a candidate affiliated with a specific political party (because such court already has a bare majority of judicial officers affiliated with such political party), then the notice for the opening will so indicate. If the notice does not so indicate, applicants affiliated with any political party, or applicants independent of any political party, may apply.
12. **Background checks:** All Applicants are subject to and are deemed to consent to a state criminal background check that will be conducted by the State Bureau of Identification (SBI) through IdentoGo. In order for this background check to be conducted, you must go to the following website to register for a fingerprinting appointment: <https://uenroll.identogo.com/>. Please use the Personal Criminal History Report service code **27RVGT** when you register and use your personal email address with your registration. The appointment must be scheduled before the deadline for submitting this application and the date provided with the application submission. Once you receive the link to access your criminal history report, please save and send a copy of your criminal history report to JNC@delaware.gov. For additional information on obtaining a state criminal background check, please go to http://www.dsp.delaware.gov/state_bureau_of_identification.shtml.

Please schedule as promptly as possible to avoid a delayed report.

Date of fingerprinting appointment: _____

I. PERSONAL INFORMATION

- | | |
|--------------------|--|
| 1. NAME: | 2. POLITICAL AFFILIATION: |
| | 2a. Has your political affiliation changed within the last two years? If so, please explain. |
| 3. OFFICE ADDRESS: | 4. OFFICE PHONE: |

5. HOME ADDRESS:

6. HOME PHONE:
CELL PHONE:
E-MAIL ADDRESS:

7. MARITAL STATUS:

8. DATE OF BIRTH:

9. SPOUSE'S NAME:

10. CHILDREN AND THEIR AGES:

11. PLACE OF BIRTH:

12. PLACES OF RESIDENCE FOR THE
PAST TEN YEARS:

II. EDUCATIONAL INFORMATION

13. EDUCATION (including preparatory, college, and law school):

School

Date of Graduation

Degree

III. PROFESSIONAL INFORMATION

14. Please identify all current and previous employers, the position held, dates of employment, the name of your supervisor, and, if applicable, your reason for leaving any employer.

Employer

Position

Dates of Employment

Reason for Leaving

15. Please describe your current practice or employment.

16. Please describe any judicial or trial-practice experience you have had, if any, since your admission to the bar.

17. If you acted as an arbitrator in the past three years, please submit the caption of each matter in which you acted as an arbitrator and the names, addresses, and telephone numbers of the attorneys involved in the arbitration.

18. Identify at least ten matters or cases in which you have been involved with professional adversaries, and briefly describe your role in the matter. Please give the caption of the case or name of the matter; names, current addresses, and current telephone numbers of all the attorneys involved (including the parties each represented); and, if the matter involved litigation, the name of the judge, and civil or criminal action number. If you are a sitting judge, please list ten recent cases you have heard; the caption of each case; civil or criminal action number; and the names, current addresses, and current

telephone numbers of any attorneys involved (including the parties each represented). If the case was decided by opinion, please submit a copy of that opinion.

19. Please list any activities from which you have derived income (e.g., self-employment, consulting activities, writing, speaking, royalties, or honoraria) during the last ten (10) years.
20. Please identify and provide copies of any books, articles, columns, scholarly publications, blogs, or any other online publications or articles you have authored, individually or with others. If you are not a sitting judge, please also submit two litigation briefs you have recently authored, if available.
21. Please identify all speeches (defined here as remarks prepared in advance, for an invited audience, intended to last more than 2 minutes, and that conveyed your personal views) you have given in the past ten (10) years in an academic, professional or community setting, and provide the texts of such speeches if available. Speeches that were given in connection with private personal or family matters (e.g. weddings and funerals) do not need to be included.
22. Please identify any public offices you have held.
23. If you have previously applied for a judicial position, please state (a) the position sought, (b) the year you applied and (c) whether or not your name was forwarded to the Governor for consideration.
24. Please identify any professional associations of which you are or have been a member.

<u>Association</u>	<u>Dates of Membership</u>	<u>Currently a Member? (Y/N)</u>
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25. Please identify any avocational interests or hobbies.
26. Please identify any civic, religious, charitable, fraternal or educational organizations of which you are or have been a member, officer or director since graduating from college, and include the time periods of your involvement with each organization.
27. Please provide the names, current addresses, current telephone numbers and current email addresses of **three** persons who are in a position to comment on your qualifications for a judicial position and of whom inquiry may be made by the Commission without embarrassment to you.
28. Please provide the names, current addresses, current telephone numbers and current email addresses of **two** persons who have worked with you in administrative support staff positions, such as your current or former secretary, to whom inquiry can be made by the Commission. For each person, please also indicate when you worked with the person and in what capacity.

IV. LICENSE INFORMATION

29. Please list all bars to which you have been admitted:

<u>Court</u>	<u>Date of Admission</u>	<u>Good Standing (Y/N)</u>
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30. Has your license to practice law in any jurisdiction ever been withdrawn, suspended, or revoked? If so, please provide an explanation.
31. Has any disciplinary action ever been taken in connection with any of your licenses to practice law? If so, please provide an explanation.
32. Please list any applications for professional licenses or certifications that were denied and the reason(s) why.

V. TAX INFORMATION

33. Have you (and your spouse, if married, filing jointly) filed all required federal, state, local, and foreign income tax returns? If the answer is no, please explain why.
34. Have you (and your spouse, if married, filing jointly) ever filed a late tax return without a valid extension? If so, describe the circumstances and resolution of the matter.
35. Have you ever paid any tax penalties? If so, describe the circumstances and the resolution of the matter.
36. Has a tax lien or other collection procedure ever been instituted against you or your spouse by federal, state, or local authorities? If so, describe the circumstances and resolution of the matter.
37. Have you ever been or do you expect to be the subject of any tax, financial, or other audit or inquiry? If so, please describe.

VI. COMPETENCY INFORMATION

38. For the questions in this section, the following terms have the meaning below:

“Ability to perform the essential functions of a judge” means:

- (i) The ability to analyze legal issues to reach reasoned legal judgments;
- (ii) The ability to evaluate the credibility of witnesses;
- (iii) The ability to make factual determinations from competing presentations;
- (iv) The ability to make decisions in a timely fashion;
- (v) The ability to serve in a fair, impartial, and unbiased manner;
- (vi) The ability to communicate orally and in writing, in an articulate and logical manner;
- (vii) The ability to demonstrate honesty, integrity, patience, open-mindedness, courtesy, tact, compassion, and humility in performing judicial functions;
- (viii) The ability to exercise control over court proceedings; and
- (ix) The ability to perform the above functions for a minimum of eight hours per day, five days per week (or such other times as Court may be in session), on a consistent basis.

“Reasonable Accommodation” means a change needed:

- (i) to ensure equal opportunities in the candidate evaluation process;

- (ii) to enable a qualified individual with a disability to perform the essential functions of a judge; and
- (iii) to enable a disabled judge to enjoy equal benefits and privileges of employment with non-disabled judges.

(a) Do you currently possess the physical and mental ability to perform the essential functions of a judge, with or without a reasonable accommodation?

Yes _____ No _____

(b) Are you currently using illegal drugs, or do you habitually use illegal drugs on a recreational basis or otherwise?

Yes _____ No _____

(c) Do you frequently fail to take any lawful medications which enable you to perform the essential functions of a judge?

Yes _____ No _____

(d) Do you typically consume alcoholic beverages to such an extent that your ability to perform the essential functions of a judge is or will be impaired?

Yes _____ No _____

(e) Are you a compulsive gambler, or have you ever been diagnosed or received treatment, therapy, or counseling for compulsive gambling?

Yes _____ No _____

If the answer to subpart (a) of Question 38 is “no”, or if the answer to subparts (b), (c), (d) or (e) is “yes”, please provide a complete explanation, including the nature, history and treatment of any such behavior. If the answer to subpart (a) of Question 38 is “no”, please complete the attached Medical Waiver and Consent and annex the executed and notarized form to your Questionnaire.

39. HAVE YOU:

(a) Ever been subject to a finding of professional misconduct?

Yes _____ No _____

(b) Ever been charged with a misdemeanor or felony?

Yes _____ No _____

(c) Ever been subject to any civil or administrative actions?

Yes _____ No _____

(d) Ever been convicted of (or pled guilty or no contest to) a traffic violation within the past five (5) years?

Yes _____

No _____

(e) Ever been convicted of (or pled guilty or no contest to or accepted first offender status for) the offense of Driving Under the Influence?

Yes _____

No _____

(f) Any circumstance in your professional or personal life that creates a substantial question as to your qualifications or ability to serve in a Judicial office?

Yes _____

No _____

(g) Ever filed a personal petition in bankruptcy, or has a petition in bankruptcy been filed against you?

Yes _____

No _____

(h) Ever owned more than 25% of the issued and outstanding shares or acted as an officer or director of any corporation by which or against which a petition in bankruptcy has been filed?

Yes _____

No _____

(i) Ever been a party to a lawsuit:

Yes _____

No _____

If the answer to any of these questions is yes, please provide an explanation of the matter or matters.

40. Are you aware of anything which may require you to recuse or disqualify yourself from hearing a case if you are appointed to serve as a member of the Judiciary? If so, please describe the circumstances where you may be required to recuse or disqualify yourself.
41. What do you believe is the best Delaware Supreme Court decision and why?
42. What do you believe is the worst Delaware Supreme Court decision and why?
43. State the reasons why you believe you would be a qualified candidate for the judicial vacancy you are currently seeking. If you currently hold that position, please state the reasons why you believe you should be reappointed.

Please sign this Questionnaire and sign and have notarized the attached Waiver of Confidentiality. If you answered “no” to Question 38(a), please sign and have notarized the attached Medical Waiver and Consent. Please email the completed Questionnaire and Attachments (following the instructions on page 1) to JNC@delaware.gov.

DATE: _____

SIGNED: _____

MEDICAL WAIVER AND CONSENT

Please complete this Medical Waiver and Consent if you answered “no” to subpart (a), of Question 38 of this Questionnaire. The Judicial Nominating Commission reserves its right to ask a candidate to provide additional information or seek additional written consent for disclosure of medical or other information at any stage in the submission process.

The undersigned hereby waives the physician-patient privilege of confidentiality, and does hereby consent that the Delaware Judicial Nominating Commission may examine and copy any and all medical records bearing upon candidate’s present state of health in the custody of any physician or health care agency.

The undersigned acknowledges that this Medical Waiver and Consent expires one hundred and twenty (120) days after the below-listed date unless the candidate notifies the Judicial Nominating Commission in writing of the candidate’s intent to revoke it prior to the expiration date. The candidate understands that any action taken in reliance on this Medical Waiver and Consent cannot be reversed, and any such revocation will not affect those actions.

This Medical Waiver and Consent does not authorize re-disclosure of information obtained by the Judicial Nominating Commission absent the express written consent of the candidate.

Date: _____

(Signature of Candidate)

STATE OF DELAWARE)
) ss.
COUNTY OF)

The undersigned, upon oath, deposes and states as follows: I am the person whose signature appears hereinabove on the instrument entitled “Medical Waiver and Consent”; I have read the same and am aware of the content thereof; that the same is true and correct according to the best knowledge and belief of the undersigned; and that I executed the same freely and voluntarily.

(Signature of Candidate)

SWORN TO AND SUBSCRIBED before me this ____ day of _____, 20__

Notary Public

**WAIVER OF CONFIDENTIALITY -
LAW ENFORCEMENT, PROFESSIONAL DISCIPLINARY
BODIES, JUDICIAL DISCIPLINARY BODIES**

The undersigned hereby waives the benefits of any statute, rule or regulation prescribing confidentiality of records of any state or federal law enforcement agency, any administrative or disciplinary Committee of the State of Delaware, including but not limited to the National Crime Information Center, the State Bureau of Identification, the Board on Professional Responsibility of the Supreme Court, the Office of Disciplinary Counsel of the Supreme Court, the Board of Bar Examiners of the Supreme Court, the Court on the Judiciary of the State of Delaware and the Commission on Continuing Legal Education; and does authorize and request every person, firm, company, corporation, governmental agency, court, association or institution having control of any documents, records or other information pertaining to the undersigned (including, but not limited to, each of the organizations listed above), to furnish to the Judicial Nominating Commission any such information, including documents, records, files regarding charges or complaints filed against the undersigned, formal or informal, pending or closed, or any other pertinent data, and to permit the Judicial Nominating Commission or any of its members, agents or representatives to inspect and make copies of such documents, records, and other information. The undersigned does hereby release and discharge the Judicial Nominating Commission, its individual members as now or hereafter constituted, their agents and representatives, the Office of the Governor of the State of Delaware, and any person so furnishing information, from any and all liability of every nature and kind arising out of the furnishing of information to or investigation made by the Judicial Nominating Commission or in any way arising out of the release and use of information so provided concerning the candidate, and hereby authorizes the Governor of the State of Delaware, after a conditional offer of employment, to obtain from candidate's physician(s) a full report of candidate's present physical condition, and further authorizes said physician(s) to prepare and release such report to the Governor. The undersigned agrees and acknowledges that the Judicial Nominating Commission may disclose certain information concerning the undersigned's submission, including a copy of this Questionnaire, to the Committee on Judicial Appointments of the Delaware State Bar Association.

Date: _____

(Signature of Candidate)

STATE OF DELAWARE)
) ss.
COUNTY OF)

The undersigned, upon oath, deposes and says as follows: that I am the person whose signature appears hereinabove on the instrument entitled "Waiver of Confidentiality — Law Enforcement, Professional Disciplinary Bodies, Judicial Disciplinary Bodies"; that I have read the same and am aware of the content thereof; that the same is true and correct according to the best knowledge and belief of the undersigned; and that I executed the same freely and voluntarily.

(Signature of Candidate)

SWORN TO AND SUBSCRIBED before me this ____ day of _____, 20__

Notary Public