

DELAWARE JUDICIAL NOMINATING COMMISSION

QUESTIONNAIRE FOR NOMINEES FOR JUDICIAL OFFICE

Revised July 3, 2018

QUESTIONNAIRE FOR NOMINEES FOR JUDICIAL OFFICE

Position Applying For: _____

Please submit to the Chairman of the Judicial Nominating Commission seven (7) printed, bound copies of this questionnaire, with all copies of writing samples and other appendices printed *double-sided* and attached to each printed, bound copy. Please also submit your application in PDF via email to JNC@state.de.us. If you need to break your application into more than one PDF file, please attach a cover sheet to each segment that contains your name and the number of total segments (i.e. "John Smith Part I of III").

NOTE: 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). In order for this background check to be conducted, **you must go to one of the three SBI locations and be fingerprinted before the deadline for submitting this application.** The locations and hours of operation of the SBI are available on its website at www.dsp.delaware.gov/state_bureau_of_identification.shtml.

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):

<u>School</u>	<u>Date of Graduation</u>	<u>Degree</u>
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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.

<u>Employer</u>	<u>Position</u>	<u>Dates of Employment</u>	<u>Reason for Leaving</u>
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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. Please give the caption of the case or name of the matter; names, addresses, and 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, addresses, and 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 writings (e.g., books, articles, columns, scholarly publications, blogs, or online articles) you have authored, individually or with others.

21. Please identify all speeches you have given in the past ten 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.

27. Please provide the names, addresses, and telephone numbers 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, addresses, and **current** telephone numbers 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.

29. Please provide a copy of your current resume or biographical statement issued by you or with your consent.

IV. LICENSE INFORMATION

30. Please list all bars for which you have been admitted:

<u>Court</u>	<u>Date of Admission</u>	<u>Good Standing (Y/N)</u>
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31. Has your license to practice law in any jurisdiction ever been withdrawn, suspended, or revoked? If so, please attach a separate explanation.

32. Has any disciplinary action ever been taken in connection with any of your licenses to practice law? If so, please attach a separate explanation.

33. Please list any applications for professional licenses or certifications that were denied and the reason(s) why.

V. TAX INFORMATION

34. 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.

35. Have you (or 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.

36. Have you ever paid any tax penalties? If so, describe the circumstances and the resolution of the matter.

37. 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.

38. 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

39. 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 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 39 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, on a separate sheet of paper, and, please complete the attached Medical Waiver and Consent and annex the executed and notarized form to your Application.

40. 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 include an explanation of the matter or matters referred to on a separate sheet of paper.

41. 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.
42. What do you believe is the best Delaware Supreme Court decision and why?
43. What do you believe is the worst Delaware Supreme Court decision and why?
44. 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 use a separate sheet if necessary.

Please sign this Questionnaire, sign and have notarized the attached waivers, and submit paper copies to the address listed below, along with a copy by email to JNC@state.de.us.

Judicial Nominating Commission
William W. Bowser, Esquire, Chairman
c/o Young Conaway Stargatt & Taylor, LLP
1000 N. King Street
Wilmington, DE 19801

DATE: _____

SIGNED: _____

MEDICAL WAIVER AND CONSENT

Please complete this Medical Waiver and Consent if you answered “no” to subpart (a), or “yes” to subparts (b), (c), (d) or (e), of Question 39 of this Application. The Judicial Nominating Commission reserves its right to ask an applicant to provide additional information or seek additional written consent for disclosure of medical or other information at any stage in the application process.

The undersigned applicant 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 applicant’s present state of health in the custody of any physician or health care agency.

The undersigned Applicant acknowledges that this Medical Waiver and Consent expires one hundred and twenty (120) days after the below-listed date unless the Applicant notifies the Judicial Nominating Commission in writing of the Applicant’s intent to revoke it prior to the expiration date. The Applicant 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 Applicant.

Date: _____

(Signature of Applicant)

STATE OF DELAWARE)
) ss.
COUNTY OF)

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

(Signature of Applicant)

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 applicant 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 applicant, and hereby authorizes the Governor of the State of Delaware, after a conditional offer of employment, to obtain from applicant's physician(s) a full report of applicant'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 application, including a copy of this application, to the Committee on Judicial Appointments of the Delaware State Bar Association.

Date: _____

(Signature of Applicant)

STATE OF DELAWARE)
) ss.
COUNTY OF)

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

(Signature of Applicant)

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

Notary Public