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| (Copy Receipt) | (Clerk’s Date Stamp) |
|  | SUPERIOR COURT OF WASHINGTON**COUNTY OF SPOKANE** |  |
| In the Guardianship/Conservatorship of: Respondent | CASE NO.  COURT VISITOR REGISTRY STATEMENT OF QUALIFICATIONS AND BACKGROUND RCW 11.130.155  |

# FOR ELIGIBILITY TO A SUPERIOR COURT VISITOR REGISTRY

1. BACKGROUND STATEMENT
	1. Level of formal education:
	2. Number of years’ experience as Court Visitor or Title 11 Guardian ad Litem:
	3. Number of prior appointments as Title 11 Court Visitor or Guardian ad Litem (*as of today’s date*): \_\_\_\_\_\_\_\_ (a) This County:  (b) Other Counties:
	4. Criminal history (as defined in RCW 9.94.A.030, must include prior ten years): ATTACH CRIMINAL WATCH BACKGROUND CHECK OR EQUIVALENT
	5. I have successfully completed the model Guardian ad Litem/Court Visitor training program on \_\_\_\_\_\_\_\_\_ [month/day], \_\_\_\_\_\_\_ [year] at \_\_\_\_\_\_\_\_\_\_\_\_\_(location).
	6. I have previously been removed as a Title 11 Guardian ad Litem/Court Visitor:

[ ]  Yes [ ]  No If yes, please explain each instance on a page attached hereto.

* 1. Knowledge or experience in needs of impaired elderly people, physical disabilities, mental illness, developmental disabilities, and other areas relevant to the needs of persons subject to guardianship or conservatorship, legal procedure, and the requirements of RCW 11.130, et. seq (if more space needed please attach on a page hereto)

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* 1. Other Relevant Training related to Court Visitor duties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. I have had contact with a party in this proceeding prior to appointment:
	1. [ ]  Yes [ ]  No If yes, please explain each instance on a page attached hereto.
2. I have had an apparent conflict of interest involving a party in this case:
	1. [ ]  Yes [ ]  No If yes, please explain each instance on a page attached hereto.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that to the best of my knowledge the statements above and any attached documents or statement are true and correct.

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| Signature of Court Visitor |  | Printed Name of Court Visitor |
|   |  |   |
| Address |  | City, State, Zip Code |
|   |  |   |
| Telephone/Fax Number |  | Email Address |