

INITIAL APPLICATION

CERTIFICATION TYPE: Capital Appellate and/or Capital Habeas

The Supreme Court of Virginia and the Virginia Indigent Defense Commission (VIDC), in conjunction with the Virginia State Bar, have adopted standards for attorneys admitted to practice law in Virginia who are qualified to represent defendants charged with capital murder or sentenced to death. Attorneys who meet the standards must submit an application for consideration to be on the certified capital defense counsel list, which is maintained by the VIDC and the Supreme Court of Virginia. VA Code §19.2-163.8. **All applications are submitted for peer panel review.**

NAME & MAILING ADDRESS			
<input type="checkbox"/> Mr.	FIRST	MIDDLE	LAST
<input type="checkbox"/> Mrs.			
<input type="checkbox"/> Ms.			
FIRM NAME			
MAILING ADDRESS (NOTE:THE ADDRESS PROVIDED WILL BE PUBLISHED ON THE <u>PUBLIC</u> CERTIFIED COUNSEL LIST)			
CITY		STATE	ZIP CODE
EMAIL ADDRESS		PHONE #	FAX #

ATTORNEY LICENSE INFORMATION		
VA STATE BAR NUMBER	YEAR LICENSED TO PRACTICE IN VA	ARE YOU IN GOOD STANDING WITH THE VA STATE BAR? <input type="checkbox"/> YES <input type="checkbox"/> NO

CERTIFICATION
APPLICATION FOR (CHECK ALL THAT APPLY) <input type="checkbox"/> CAPITAL APPELLATE <input type="checkbox"/> CAPITAL HABEAS
CIRCUIT(S) IN WHICH YOU ARE WILLING TO ACCEPT APPOINTMENT (CHECK ALL THAT APPLY) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/> 21 <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28 <input type="checkbox"/> 29 <input type="checkbox"/> 30 <input type="checkbox"/> 31

MANDATORY INITIAL CAPITAL CERTIFICATION TRAINING	
Attorneys seeking any type of Capital Certification should complete the VIDC Initial Capital Certification Training for all capital certification types. The training must have been completed within two (2) years of submitting this application.	
DATE(S) OF COMPLETION	# OF HOURS ATTENDED
TRAINING WAIVER NOTICE	
Qualified and experienced attorneys may be considered for a waiver of the mandatory Initial Capital Certification Training ONLY (other certification requirements outlined on this application still apply) by completing the optional waiver application available on the last page of this document.	

MANDATORY PERSONAL NARRATIVE

On a separate sheet, please answer the following questions with particularity:

1. Why do you want to be capital certified?
2. How are capital murder and non-capital murder cases handled differently?
3. Have you read the ABA Guidelines for Application and Performance of Defense Counsel in Death Penalty Cases?
4. How have you met or exceeded those standards, especially those outlined in §10.1 – 10.15.2?

Additionally, see the applicable questions below

ADDITIONAL QUESTIONS FOR – CAPITAL APPELLATE COUNSEL APPLICANTS

5. Describe with particularity the following information:
 - A. Information demonstrating that you are thoroughly familiar with the rules and procedures of appellate practice.
 - B. Provide your experience as counsel in direct appeals of felony convictions.

ADDITIONAL QUESTIONS FOR – CAPITAL HABEAS COUNSEL APPLICANTS

6. Describe with particularity the following information:
 - A. Information demonstrating that you are thoroughly familiar with the rules and procedures related to habeas proceedings.
 - B. Provide your experience as counsel in a least one habeas proceeding.
 - C. Confirm **mandatory completion** of six (6) hours of particularized training in Capital Habeas procedure and practice (in addition to Initial Capital Certification Training). You must include the name of the Course/Seminar (NOT the CLE course #), sponsoring organization, date(s) of attendance, and number of hours attended.

ELIGIBILITY NOTICE: To maintain eligibility for capital certification, an attorney shall formally re-certify two (2) years after being initially certified by completing specialized training in capital litigation approved by the VIDC.

SUNSET PROVISION NOTICE: Every four (4) years, the capital certification list will expire on December 1st (first Sunset Year is 2019). An attorney will not be placed back on the list unless a Sunset Application is submitted and approved. The expiration of an attorney's certification will not affect the attorney's prior appointment in any pending case.

STATEMENT OF TRUTH:

Initial: _____ I hereby certify that the answers provided to the above questions are true and complete. The VIDC may request further information to verify that I have met the qualification requirements. Failure to comply may result in my denial or removal from the certified counsel list.

Initial: _____ I understand that if I provide any information that is dishonest, fraudulent or a misrepresentation, I will be reported to the Virginia State Bar for a misconduct inquiry under Rule 8.4 of Virginia Rules of Professional Conduct, removed from the certified counsel list, and the courts will be notified of the removal.

Signature: _____ **Date:** _____

Return completed application and mandatory personal narrative by e-mail to:

certification@adm.idc.virginia.gov

WAIVER APPLICATION (OPTIONAL)

MANDATORY INITIAL CAPITAL CERTIFICATION TRAINING

Qualified and experienced attorneys may be considered for a waiver of the mandatory **Initial Capital Certification Training** through the completion of this application.

Please note that this waiver application applies to the mandatory Initial Capital Certification Training ONLY. If approved, you must still provide the information requested under the mandatory Personal Narrative section of the Initial Capital Certification Application.

IDENTIFYING INFORMATION			
<input type="checkbox"/> Mr.	FIRST	MIDDLE	LAST
<input type="checkbox"/> Mrs.			
<input type="checkbox"/> Ms.			
VA STATE BAR NUMBER	EMAIL ADDRESS	PHONE NUMBER	

On a separate sheet, please describe with particularity the following information:

1. Information demonstrating your substantial knowledge and understanding of the requirements of capital representation in the following areas:
 - a. Relevant state and federal law, including the representation of foreign nationals;
 - b. Pleading and Motion practice;
 - c. Pre-trial investigation, preparation, and theory development regarding guilt/innocence and penalty;
 - d. Jury selection;
 - e. Trial preparation and presentation, including the use of experts;
 - f. Investigation, preparation, and presentation of mitigating evidence;
 - g. Investigation, preparation, and presentation of mental health evidence including intellectual disability;
 - h. Ethical considerations particular to capital defense representation;
 - i. Preservation of the record for post-conviction review and capital appellate practice;
 - j. Relationship building with the client and the client's family;
 - k. Presentation and rebuttal of scientific evidence.
2. Information demonstrating your experience in providing high quality legal representation to persons charged with capital murder.
3. Information demonstrating your skill in the management and conduct of complex negotiations and capital litigation.
4. Information demonstrating your skill in oral advocacy.
5. Information demonstrating your skill in the elements of capital trial advocacy such as cross-examination.

Return this Waiver Application and your completed Certification Application by email to:
certification@adm.idc.virginia.gov