



State of Indiana  
Public Defender Commission

APPLICATION FOR CAPITAL CASE ROSTER

Name: \_\_\_\_\_ Attorney No.: \_\_\_\_\_

Date Admitted to Indiana Bar: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

County: \_\_\_\_\_

Telephone: Office \_\_\_\_\_ Home \_\_\_\_\_

Facsimile \_\_\_\_\_

Email \_\_\_\_\_

## Lead Counsel

- Yes                  No  
 \_\_\_\_\_        \_\_\_\_\_ 1. Do you have at least five (5) years of criminal litigation experience?
- \_\_\_\_\_        \_\_\_\_\_ 2. Do you have prior experience as lead or co-counsel in at least five (5) felony jury trials that went to verdict? If yes, provide the following information:

	Client's Name	Cause Number	Date of Trial	County
(1)				
(2)				
(3)				
(4)				
(5)				

- Yes                  No  
 \_\_\_\_\_        \_\_\_\_\_ 3. Do you have prior experience as lead or co-counsel in at least one (1) case in which the death penalty was sought? If yes, provide the following information:

	Client's Name	Cause Number	Date of Trial	County
(1)				

## Co-Counsel

- Yes                  No  
 \_\_\_\_\_        \_\_\_\_\_ 1. Do you have at least three (3) years of criminal litigation experience?
- \_\_\_\_\_        \_\_\_\_\_ 2. Do you have prior experience as lead or co-counsel in at least three (3) felony jury trials that went to verdict? If yes, provide the following information:

	Client's Name	Cause Number	Date of Trial	County
(1)				
(2)				
(3)				

**Appellate Counsel**

Yes                  No  
\_\_\_\_\_          \_\_\_\_\_ 1. Do you have at least three (3) years of criminal litigation experience?  
  
\_\_\_\_\_          \_\_\_\_\_ 2. Do you have prior experience as appellate counsel in no fewer than  
three (3) felony convictions in federal or state court within the last five  
(5) years? If yes, provide the following information:

	Client's Name	Cause Number	Date of Trial	County
(1)				
(2)				
(3)				

Yes                  No  
\_\_\_\_\_          \_\_\_\_\_ The Indiana Public Defender Commission has my permission to  
include me on their website as qualified to take capital cases

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return to:                  Indiana Public Defender Commission  
309 W Washington Street Suite 501  
Indianapolis, Indiana 46204  
Telephone (317) 233-6908  
information@pdcom.in.gov

***Please remember to notify the Indiana Public Defender Commission each time you attend a continuing legal education course/seminar by submitting a "Training in the Defense of Capital Cases" form. This form may be downloaded from the Indiana Public Defender Commission's website at <http://www.in.gov/publicdefender/2376.htm>***