



## Application for Appointment to Serve on State Bar Committees

### Application Instructions

- Download** the application and save a copy to your computer to fill out.
- Assemble** application packet in the following order: (1) application, signed and dated; (2) resume or biography (5 page maximum); (3) letters of recommendation (optional, 3 letter maximum).
- Submit** an application packet and if you are applying to more than one committee, please number the order of preference next to each committee to which you are applying. Application packets may be submitted electronically, but all documents must be provided in a single, scanned PDF, organized as directed above, sent to [appointments@calbar.ca.gov](mailto:appointments@calbar.ca.gov).

Applications are accepted year-round. For a list a current vacancies, please visit the [Committee Appointment Opportunities](#) webpage.

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## Application for Appointment to Serve on State Bar Committees

Name:

CA State Bar Number:

Check here if you are an attorney but not admitted to practice in California:

Check here if you are a member of the public (nonattorney):

Check here if you are a current or former judicial officer:

**Please complete all fields**

Employer/Firm/Agency:

Address:

City:

State:

Zip Code:

Phone Number:

Email address:

### Committee Appointment Sought

If you are applying to more than one committee, please number the order of preference next to each committee (i.e., 1 for first choice, 2 for second, etc.)

<input type="checkbox"/> <a href="#">California Board of Legal Specialization</a>	<input type="checkbox"/> <a href="#">Consulting Group on the Establishment of a Legal Specialization in Privacy Law</a>	
<input type="checkbox"/> <a href="#">Client Security Fund Commission</a>	<input type="checkbox"/> <a href="#">Council on Access and Fairness</a>	
<input type="checkbox"/> <a href="#">Committee of Bar Examiners</a>	<input type="checkbox"/> <a href="#">Lawyer Assistance Program Oversight Committee</a>	
<input type="checkbox"/> <a href="#">Commission on Judicial Nominees Evaluation</a>	<input type="checkbox"/> <a href="#">Legal Services Trust Fund Commission</a>	
<input type="checkbox"/> <a href="#">Committee on Professional Responsibility and Conduct</a>	<input type="checkbox"/> <a href="#">Review Committee for Commission on Judicial Nominees Evaluation</a>	
<input type="checkbox"/> <a href="#">Committee on State Bar Accredited and Registered Schools</a>	<input type="checkbox"/> Other:	

**HOW DID YOU LEARN OF THE VACANCY? (Check all that apply)**

- Board of Trustees member (*name*):
- State Bar committee member (*name*):
- Bar Association:
- State Bar website
- Facebook
- Twitter

- Instagram
  - LinkedIn
  - Email
  - Newsletter
  - Other (specify):
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**WHICH ONE OF THE FOLLOWING BEST DESCRIBES YOUR OCCUPATION? (Check one; specify if requested)**

**Nonlawyer Applicants**

- Financial professional
- Medical or health professional
- Education professional
- Business professional
- Government professional
- Retired
- Other (please specify):

**Attorney Applicants**

- Private sector attorney working in a law firm
- Solo practitioner
- In-house counsel
- Public sector attorney
- Legal services attorney
- Attorney not practicing law (please specify):
- Retired
- Other (please specify):

If you selected "Private sector attorney working in law firm" above, **WHAT IS THE SIZE OF THE FIRM?** (Check one)

- 2–5 attorney firm
  - 6–10 attorney firm
  - 11–25 attorney firm
  - 26–50 attorney firm
  - 51–100 attorney firm
  - 101–200 attorney firm
  - 200+ attorney firm
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**PRACTICE AREAS (Select all that apply)**

- |   |  |
|---|--|
| <input type="checkbox"/> Not applicable         | <input type="checkbox"/> Immigration   |
| <input type="checkbox"/> Admiralty and Maritime | <input type="checkbox"/> International |

- Administrative
- Appellate
- Banking/Finance
- Bankruptcy
- Business
- Civil Litigation
- Civil Rights/Constitutional Law
- Commercial/Sale of Goods
- Consumer Protection
- Criminal
- Disability Rights
- Education
- Elder Abuse
- Employment/Labor
- Energy/Environment
- Family
- Franchise and Distribution
- Health care
- Insurance
- Intellectual Property
- Legislative
- Mediation/Arbitration
- Media, Sports, and Entertainment
- Military Law and Veterans
- Personal Injury
- Personal Property, Sales, and Leases
- Privacy, Data Security and Cyber Security
- Professional Malpractice (Medical, Legal, Other)
- Real Estate
- Taxation
- Trusts
- Workers and Compensation
- Wills & Estates
- Tribal Law
- Other (please specify):

**CERTIFIED SPECIALIST PRACTICE AREAS:** Select an answer

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**VOLUNTEER SERVICE.** List prior and current volunteer service with the State Bar, the California Lawyers Association, local/affinity/specialty bar associations, community, or other organizations. Please focus on activities that prepare you for the committee to which you are seeking to be appointed.

**STATEMENT OF INTEREST.** Please state why you wish to serve on the committee and what you can contribute that makes you a good candidate for appointment.

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**EXPERIENCE.** Describe any prior experience you have had with the committee.

**ADDITIONAL BACKGROUND.** Describe any additional background relevant to your appointment to the committee, including, but not limited to, how you can contribute to its diversity and broad composition.

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**Diversity**

All applicants are encouraged to provide the following information to help the State Bar meet its diversity goals.

**Gender Identity**

Select an answer

If you selected “Other”, please specify:

**Which of the following best applies you? (Choose all that apply):**

- Cisgender
- Transgender
- Intersex
- Not listed (please specify):

**How do you describe your sexual orientation or sexual identity (Choose all that apply):**

- Lesbian
- Gay
- Bisexual
- Heterosexual
- Pansexual
- Asexual
- Not listed (please specify):

**Race/Ethnic Group (choose all that apply)**

- Hispanic/Latino
  - Mexican
  - Puerto Rican
  - Cuban
  - Central American
  - South American
  - Other Hispanic (please specify):
- White
- Black or African American
- Asian
  - Chinese
  - Korean
  - Japanese
  - Southeast Asian
  - Filipino
  - South Asian
  - Other Asian (please specify):
- Middle Eastern or North African
- American Indian or Alaska Native
- Native Hawaiian or Other Pacific Islander
- Other race, ethnicity, origin (please specify):

**Do you identify as a person with a disability?**

Select an answer

**If yes, select all that apply**

- A vision impairment
- A hearing impairment
- A mobility impairment
- A learning disability
- A disability or impairment not listed above (please specify):

**Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?**

Select an answer

**What age group describes you?**

Select an answer

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**SIGNATURE.** Sign and date your application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(If you type your name on the signature line, please include the symbol "/s/" to show this is your signature.)*

## **Application Checklist**

- Application form with all questions answered
- Attach resume or biography (5 page maximum)
- Attach optional letters of recommendation (3 letter maximum)
- Sign and date the application
- Submit the application