

**REGISTRATION FOR COURT APPOINTMENTS
PROBATE COURT NO. TWO
JUDGE MIKE WOOD**

Attorney Name: _____

Firm Name: _____

Bar #: _____

Address: _____

Phone Number: _____

Fax Number: _____

Cell Phone Number: _____

E-mail: _____

Foreign languages
spoken (including sign language): _____

In which roles would you like to serve?

_____ Heirship

_____ Guardianship:

_____ Attorney Ad Litem

_____ Guardian Ad Litem

Specialty Appointment (you must have additional licenses/certifications or experience):

_____ as a Doctor for an Independent Medical Exam

_____ as a Mediator

_____ as an Appraiser of Personal Property

_____ as an Appraiser of Real Property

_____ as a Private Professional Guardian

Please attach your current four hour certificate, along with your resume. It is the responsibility of the attorney to notify the court of any changes to the above.