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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **APPLICATION FORM**  **UNITED STATES MAGISTRATE JUDGE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please answer all questions. If a question is not applicable, indicate this by marking N/A. Applications must be submitted only by the applicant and **must be received by 4:30 p.m. on Monday, April 22, 2024.** Signed applications must be submitted electronically to [Applications@ned.uscourts.gov](mailto:Applications@ned.uscourts.gov). For further information, contact:  Office of the Clerk  United States District Court for the District of Nebraska  Roman L. Hruska U.S. Courthouse  111 South 18th Plaza, Suite 1152  Omaha, NE 68102-1322  (402) 661-7362 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **GENERAL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. | Full name: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | All other names by which you have been known: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| 3. | Office address: | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | City | | |  | | | | | | | | | | | | | | | | | | | | | | | | State | | | | | | | |  | | | | Zip | | | | | |  | | | | | | | |
|  | Telephone | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. | Residential address: | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | City | | |  | | | | | | | | | | | | | | | | | | | | | | | | State | | | | | | | |  | | | | Zip | | | | | |  | | | | | | | |
|  | Telephone | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. | Place of birth: | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Date of birth: | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. | Length of residence in state: | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. | If you are a naturalized citizen, state the date and place of naturalization. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. | Military service: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Branch | | | | | | |  | | | | | | | | | | | | | | | | | | | | Dates | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  | Rank or Rate at Discharge | | | | | | | | | | | | | | | | |  | | | | | | | | | | Type of Discharge | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | If still a reserve or national guard member, give service, branch, unit, and present rank. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9. | Are you related by blood or marriage to any judges of this court? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Yes | | | |  | No. | | | | |
|  | If yes, give name(s) and relationship. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **HEALTH** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10. | What is the present state of your health? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. | Do you have any mental or physical impairment that would affect your ability to perform the duties of a magistrate judge with or without reasonable accommodation? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **EDUCATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. | Colleges and universities attended, dates, and degrees: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 13. | Continuing legal education courses completed within the last 10 years: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **HONORS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. | Were you a member of law review? | | | | | | | | | | | | | | | | | | | | |  | | Yes | | |  | | | No. | | | If yes, describe role: | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15. | If you have published any legal books or articles, list them, giving citations and dates. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16. | List any honors, prizes, or awards you have received. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PROFESSIONAL ADMISSIONS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17. | List all courts (including state bar admissions) and administrative bodies having special admission requirements in which you are presently admitted to practice, giving the dates of admission in each case: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **LAW PRACTICE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. | State the names, addresses, and dates of employment for all law firms with which you have been associated in practice, all government agencies, and all private business organizations in which you have been employed. Also provide all dates during which you have practiced as a sole practitioner. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19. | Describe the general nature of your current practice including any legal specialties and character of your typical clients; also, if your practice is substantially different now than previously, give details of prior practice. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 20. | a) Do you appear regularly in court? | | | | | | | | | | | | | | | | | | | |  | | Yes | | |  | | | No. | | | | | | | | | | | | | | | | | | | | | | | | |
|  | b) What percentage of your appearances in the last five years were in: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | 1. Federal courts | | | | | | | | | | | | | | | | | |  | | | | | | | | | % | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | 2. State or local courts of record | | | | | | | | | | | | | | | | | |  | | | | | | | | | % | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | 3. Administrative bodies | | | | | | | | | | | | | | | | | |  | | | | | | | | | % | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | 4. Other: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | | | |  | | |  | | | | | | | | | % | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | |  | | | | | | | | | | | | | | |  | | |  | | | | | | | | | % | | | | | | | | | | | | | | | | | | | | | |
| 21. | During the past five years, what percentage of your practice has been trial practice? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | % | |
| 22. | How frequently have you appeared in court? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | times per month. | | | | | | | | | | | | | | | | | | |
| 23. | How frequently have you appeared at administrative hearings? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | times per month. | | | | | | |
| 24. | What percentage of your practice involving litigation has been: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | Civil | | | | | | | | | | | | | | |  | | |  | | | | | | | | | % | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | Criminal | | | | | | | | | | | | | | |  | | |  | | | | | | | | | % | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | Other: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | | | |  | | |  | | | | | | | | | % | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | |  | | | | | | | | | | | | | | |  | | |  | | | | | | | | | % | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 25. | State the number of cases you have tried to conclusion in courts of record during the past five years, indicating whether you were sole, associate, or chief counsel. Give citations of any reported cases. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 26. | Summarize your courtroom experience for the past five years. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 27. | State the names and addresses of adversary counsel against whom you have litigated your primary cases over the past five years. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PUBLIC OFFICE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 28. | Have you ever run for, or held, public office? | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | Yes | | | |  | | | | No. | If yes, give details. | | | | | | | | | | | | | | |
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| **PRIOR JUDICIAL EXPERIENCE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 29. | a) Have you ever held judicial office or been a candidate for judicial office? If so, state the courts involved and the dates of service, or dates of candidacy. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | b) If you have held judicial office, state the names and addresses of counsel who have appeared before you who would be knowledgeable of your work, temperament, and abilities. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | c) Prior quasi-judicial service: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Name of agency | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Position held | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Hearings on what types of issues | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Number of cases adjudicated | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Dates of service | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **BUSINESS INVOLVEMENT** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 30. | a) If you are now an officer, director, or otherwise engaged in the management of any business enterprise, state the name of such enterprise, the nature of the business, the nature of your duties, and whether you intend to resign such position immediately upon your appointment to judicial office. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | b) Since being admitted to the Bar, have you ever engaged in any occupation, business, or profession other than the practice of law? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Yes | | | |  | | No. | | | | | If yes, give the details, including dates. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | c) During the past five years have you received any fees or compensation of any kind, other than for legal services rendered, from any business enterprise, institution, organization, or association of any kind? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Yes | | | |  | | No. | | | If yes, identify the source of such compensation, the nature of the business enterprise, institution, organization or association involved, and the dates such compensation was paid. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | | | |  | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 31. | a) Have you ever been arrested, charged, or convicted for violation of any federal law, state law, county or municipal law, regulation, or ordinance? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Yes | | | |  | | No. | | | | | If yes, give details. (Do not include traffic violations for which a fine of $200 or less was imposed unless it also included a jail sentence.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | | | |  | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | b) Have you, to your knowledge, ever been under federal, state, or local investigation for possible violation of a criminal statute? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Yes | | | |  | | No. | | | | | If yes, give particulars. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 32. | a) Have you ever been sued by a client? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Yes | | | |  | | No | | | | | If yes, give particulars. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | b) Have you or your professional liability insurance carrier ever settled a claim against you for professional malpractice? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Yes | | | |  | | No. | | | | | If yes, give particulars, including the amounts involved. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 33. | Have you ever been charged in any civil or criminal proceedings with conduct alleged to involve moral turpitude, dishonesty, or unethical conduct? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Yes | | | |  | | No. | | | | | If yes, give particulars. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 34. | Have you ever been disciplined or cited for a breach of ethics or unprofessional conduct by any court, administrative agency, bar association, or other professional group? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Yes | | | |  | | No. | | | | | If yes, give particulars. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 35. | Have you filed appropriate tax returns as required by federal, state, local, and other government authorities? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Yes | | | |  | | No. | | | | | If no, explain. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 36. | Have any liens or claims ever been instituted against you by the federal, state or local authorities? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Yes | | | |  | | No. | | | | | If yes, explain. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PROFESSIONAL AND OTHER ACTIVITIES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 37. | a) List all bar associations and legal professional societies of which you are a member and give the titles and dates of any office you have held in such groups, and committees to which you belonged. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | b) List all organizations and clubs, other than bar associations and professional societies identified in response to Question No. 37.a), of which you have been a member during the past ten years, including the titles and dates of any offices you have held in each such organization. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | --- | | c) Have you ever served on a merit selection panel to consider the appointment or reappointment of a  United States magistrate judge in this district? If yes, please provide date(s) or appointment(s). | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SUPPLEMENTAL INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 38. | State any achievements or actions you have accomplished demonstrating your commitment to equal justice under the law. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 39. | State any additional education or other experiences you believe would assist you in holding judicial office. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 40. | State any other pertinent information reflecting positively or adversely on you which you believe should be disclosed to the district court and the selection panel in connection with your possible selection as United States magistrate judge. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 41. | a) List three individuals as references who are familiar with your abilities. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | b) List three individuals as references who are familiar with your personal character. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **CONFIDENTIALITY STATEMENT** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| This form will be kept confidential and will be examined only by members of the merit selection panel and the judges of the district court. The individuals whom you have listed as references above may be contacted by the panel, but no other employers, colleagues, or other individuals will be contacted without your prior approval.  **WAIVER**  I hereby authorize the custodian of any records or information to permit the examination or receipt of such information, whether written, electronic, or oral, by the merit selection panel for the appointment of a United States Magistrate Judge for the District of Nebraska, any of the judges of the United States District Court, or the Federal Bureau of Investigation. I also authorize those entities and persons to consult with my former employers, my current employer, my professional colleagues, my physicians, and any other persons or entities with regard to matters pertinent to my qualifications for the position of a United States Magistrate Judge. A photo copy of this waiver may be relied upon in lieu of an original.  I declare under penalty of perjury that the foregoing is true and correct. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature of Applicant | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | | | |  | | | |