

# WISCONSIN STATE PUBLIC DEFENDER

## *Protecting Justice For All*

### Misdemeanor, Paternity, Ch. 51/55 Civil Commitment, Children in Need of Protection or Services (CHIPS), Juvenile Delinquency (Misdemeanor) and Revocation (Misdemeanor) Certification List Request

Name:	SBID:
-------	-------

I request certification for the following case types (check all that apply):

**Trial 1 – Misdemeanors & Paternities:**

No other requirements. Wis. Admin. Code s. PD 1.04 (1) and (2)

**Trial Special 1 – Civil commitments/guardianships/protective placements:**

The attorney has completed two credits of state public defender approved legal education pertaining to ch. 51 or 55, Stats., or has agreed in writing to complete two credits of state public defender approved legal education pertaining to ch. 51 or 55, Stats., during the first year of his or her provisional certification. Wis. Admin. Code s. PD 1.04 (11).

Attach a separate sheet identifying the credits of approved training completed or sign below.

I agree to complete two credits of state public defender approved legal education pertaining to ch. 51 or 55, Stats., during the first year of my provisional certification.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Trial Special 2 – Ch. 48 CHIPS and ch. 938 juvenile delinquency (misdemeanors):**

The attorney has either completed four credits of state public defender approved legal education pertaining to ch. 48 or 938, Stats., cases, or has agreed in writing to complete four credits of state public defender approved legal education pertaining to ch. 48 or 938, Stats., cases during the first year of his or her provisional certification. Wis. Admin. Code s. PD 1.04 (7).

Attach a separate sheet identifying the credits of approved training completed or sign below.

I agree to complete four credits of state public defender approved legal education pertaining to ch. 48 or 938, Stats., during the first year of my provisional certification.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Trial Special 4A – Revocation of probation, parole, extended supervision (misdemeanor):**

The attorney has completed two credits of state public defender approved legal education pertaining to revocation, or has agreed in writing to complete two credits of state public defender approved legal education pertaining to revocation during the first year of his or her provisional certification. Wis. Admin. Code s. PD 1.04 (12) (a).

Attach a separate sheet identifying the credits of approved training completed or sign below.

I agree to complete two credits of state public defender approved legal education pertaining to revocation during the first year of my provisional certification.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I have reviewed the certification rules in Wis. Admin. Code ch. PD 1. I certify that all information submitted in support of my certification list request is true and correct. I understand that any material misrepresentation may result in denial of my certification list request or decertification.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Return this form with any required attachments and your general certification application form to:

Assigned Counsel Division  
Wisconsin State Public Defender  
P.O. Box 7923  
Madison, WI 53707-7923  
(608) 267-1771

2/7/2010