



**CONFIDENTIAL BEFORE THE  
BOARD OF LEGAL SPECIALIZATION**

**APPLICATION FOR  
RECERTIFICATION IN  
PERSONAL INJURY AND WRONGFUL DEATH**

Revised January 1, 2020

Name	
Bar Number	
Firm	
Street and/or PO Box Address	
City	
State/Zip	
Telephone	
Email	
Date of Submission	

Please submit your application:

PDF version – by email to: [specialization@staff.azbar.org](mailto:specialization@staff.azbar.org)

**NOTE:**

A \$300 application fee, payable to the State Bar of Arizona, is to be submitted with a copy of the first page of your application to:

Board of Legal Specialization  
State Bar of Arizona  
4201 N. 24<sup>th</sup> Street, Suite 100  
Phoenix, AZ 85016-6266

For applications submitted AFTER August 1 – an additional \$100 late fee is assessed. Applications submitted after October 1st will not be accepted.

**I. On a separate sheet, please provide the following information:**

- A. Record of Discipline.** A discipline check will be conducted on every applicant. Since the date of your last application for certification, please list any disciplinary actions taken against you in any state, jurisdiction, or organization. In addition, list all instances of discipline in which the sanction imposed was censure or greater, or an informal reprimand in which the disciplinary record was public, pursuant to Rule 70, Ariz. R. S. Ct. A record of discipline or failure to disclose the same may constitute grounds for denial of an application.
- B. Employment History.** In chronological order, beginning with your most recent employment, list a complete statement of your employment during the last five years. Include the dates of employment, employer's name and address, and a brief summary of the nature of the work performed.
- C. References.** List the names, mailing addresses and e-mail addresses of five attorneys who practice in personal injury and wrongful death litigation and/or judges before whom you have appeared, familiar with your practice, and not including current partners or associates. You may not use as references the members of the Board of Legal Specialization or the Personal Injury and Wrongful Death Advisory Commission. A list of the members serving in these capacities can be found at:

<https://www.azbar.org/for-lawyers/career-advancement/legal-specialization/becoming-a-specialist/>

In addition to the references you provide, the Personal Injury and Wrongful Death Advisory Commission will also contact other individuals with respect to your qualifications. All references will be requested to provide written comments regarding your knowledge, skill, thoroughness, preparation, effectiveness and judgment in personal injury and wrongful death litigation as well as your ethics and professionalism. Statements of references shall be confidential and privileged from disclosure, except to the applicant upon request.

The Standards for Certification require that an applicant demonstrate a high degree of honesty, integrity and professionalism and meet high ethical standards in compliance with, and as defined by, the Lawyer's Creed of Professionalism of the State Bar of Arizona as well as the Rules of Professional Responsibility. These standards are higher than the bare minimum ethical and professionalism standards an attorney must meet to avoid disciplinary action or the threshold conduct that would warrant the filing of a bar complaint.

- D. Substantial Involvement in Injury and Wrongful Death Litigation.** Pursuant to the Standards for Certification of Lawyers Specializing in Injury and Wrongful Death Litigation, recertification applicants must demonstrate substantial involvement in the field of injury and wrongful death litigation during the past five years.

For purposes hereof, "litigation" is defined to be legal representation in any dispute where a trial or other evidentiary hearing on the merits might ultimately be necessary whether by a court, with or without a jury, or by other alternative method of dispute resolution such as arbitration.

For purposes hereof, "injury and wrongful death" matters are defined to be legal representation of claimants or defendants with regard to injury and wrongful death claims, or insurance coverage disputes, arising out of vehicular collisions, medical malpractice, premises defects, product failures, aircraft crashes, or any other area of tort law involving physical and/or mental injuries and damages.

For purposes hereof, "substantial involvement" shall mean the engagement by the applicant in legal service (as defined in Section 1 of the Rules and Regulations of the Arizona Board of Legal Specialization) equivalent to at least 50% of a full-time practice, in the course of which the applicant has annually devoted at least 1,000 hours to injury and wrongful death litigation, and at least 50% of those hours must involve Arizona injury and wrongful death matters.

To demonstrate substantial involvement, please provide the following information:

1. Describe the nature of legal services in which you have been engaged in the past five years, identifying the types of issues of Injury and Wrongful Death Litigation with which you have dealt and the frequency of involvement therewith.
2. List the following information for each jury trial in which you were lead counsel during the past five years to demonstrate substantial involvement in the field of injury and wrongful death litigation.

Title of Case:

Plaintiff or Defense Counsel:

Case Number:

Court Where Tried:

Nature of Trial:

Brief Description of Facts:

What action did you take?

Number of Depositions?

Dispositive Motions?

How was this case resolved?

Why is this a significant case?

Description of Injuries Sustained by Plaintiff:

Amount of Final Settlement Demand and When Made:

Amount of Final Settlement Offer and When Made:

Date Trial Commenced:

Length of Trial:

Date Submitted to Jury or Date Verdict Rendered:

Jury Verdict:

Judge:

Co-Counsel:

If Co-Counsel listed, detail your participation at trial:

Names and Addresses of Opposing Counsel:

Names of Expert Witnesses at Trial, if any:

3. If you have not acted as lead counsel in 10 jury trials during the past five years, list the following information for the most significant cases you have handled during the past five years. The information provided from a combination of your jury trials and significant cases must equal ten matters including at least three cases with judicial involvement.

Title of Case:

Plaintiff or Defense Counsel:

Case Number:

Nature of Legal Services Provided:

Brief Description of Facts:

Judge:

Co-Counsel:

If Co-Counsel is listed, detail your participation:

Name and Address of Opposing Counsel:

**E. Continuing Legal Education.**

Provide information regarding CLE you acquired with advanced level subject matter in the area of specialization in which you are seeking certification.

If you did not, indicate in a separate statement that this question is not applicable and provide an explanation.

If your answer is affirmative, provide copies of your MCLE affidavits (last five educational years only), clearly indicating on the affidavit (circle, underline, asterisk, etc.) those events in the area of specialization.

If you have not filed your affidavit for the current educational year, print a copy of the tracking page clearly indicating the advanced level events in the area of specialization.

**F. Malpractice Insurance.**

Certified Specialists are required to carry legal malpractice insurance. This insurance must have minimum limits commensurate with the largest case you typically handle. This requirement is waived for attorneys not holding themselves out to members of the public for retention (i.e.: no malpractice coverage is required for employees of insurance companies, corporations or other entities ultimately responsible for the actions of employed counsel).

**Read and initial each of the following statements and sign below:**

- a. \_\_\_\_\_ I agree to abide by all Rules and Regulations of the Arizona Board of Legal Specialization as amended from time to time, to pay all fees required by the Board of Legal Specialization as due, and to furnish to the Board such information as may be required from time to time to ascertain my entitlement to certification.
- b. \_\_\_\_\_ I certify that I am an active member in good standing of the State Bar of Arizona and that I continue to engage in legal service (as defined in the Rules and Regulations of the Arizona Board of Legal Specialization) on an annual basis equivalent to at least 50% of a full-time practice.
- c. \_\_\_\_\_ I annually devote not less than 50% of a full-time practice to personal injury law, as defined in the Standards for Certification for Lawyers Specializing in Personal Injury Law.
- d. \_\_\_\_\_ Pursuant to Rule 70, Ariz. R. Sup. Ct., I hereby waive confidentiality of any disciplinary proceeding initiated against me by the State Bar of Arizona after January 1, 1992, or which may be initiated against me during the pendency of my application. I understand and agree, to the extent permitted under Rule 70, Ariz. R. Sup. Ct., that my disciplinary records may be requested from the Lawyer Regulations Records Manager (or representative) or Disciplinary Clerk.
- e. \_\_\_\_\_ I agree to advise the Board of Legal Specialization, from the date of filing this current application throughout the next approved five-year period of certification, of any disciplinary action taken against me in any state, jurisdiction, or organization. I will advise of all instances of discipline in which the sanction imposed was censure or greater, or an informal reprimand in which the disciplinary record was public. Further, if any formal matters are pending against me, or any develop, I will advise the Board.
- f. \_\_\_\_\_ I certify that [1] I carry legal malpractice insurance with per-case coverage limits commensurate with the largest case I typically handle OR [2] I am exempt from carrying malpractice insurance as set forth in section 3F, above.
- g. \_\_\_\_\_ I authorize all persons, firms, officers, corporations, organizations, associations (including Bar Associations of other jurisdictions), State or Federal agencies and institutions to furnish to the Board of Legal Specialization or any of its authorized representatives, all relevant documents, records or other information that may be requested in the investigation of this application or in any investigation of my continuing satisfaction of the Standards for Certification.
- h. \_\_\_\_\_ I authorize the Board of Legal Specialization to consult with any persons who may have information relating to my professional qualifications, credentials or character, ethics, behavior, or any other matter reasonably bearing on the criteria for initial and continued certification. I further agree that all information received by the Board shall be treated confidentially and that I have no right of access to information received by the Board from third parties. I specifically waive any right to review any reference or other evaluations made to the Board, whether solicited by me or the Board. In addition, I agree not to seek discovery of such references and evaluations, formally or informally, in any legal proceeding or otherwise.
- i. \_\_\_\_\_ I release, discharge and exonerate the State Bar of Arizona, its officers, directors, staff, agents, employees and representatives, and any person furnishing information and evaluations to the Board of Legal Specialization, from any and all liability of every nature and kind arising from the investigation and evaluation of my application or my continued satisfaction of the Standards for Certification.
- j. \_\_\_\_\_ I authorize the Board of Legal Specialization to release my application, if requested, to a professional attorney organization to which I have applied for membership, or to which I am being nominated for membership. I understand the Board will not release the peer review forms, investigation, or work product thereof.

I certify my application is true or true to the best of my knowledge and belief. I understand that failure to make a truthful disclosure of any material fact or item of information required may result in the denial of my application, revocation of my certificate of specialization if granted, or disciplinary action by the State Bar of Arizona.

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*Signature of Applicant*

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*Date*