

MEMO

To: Custody Investigator/Guardian ad litem applicants

From: Marilyn Moe, Program Manager

Date: August 7, 2008

Re: Custody Investigator/Guardian ad litem Roster

To be listed on the roster and qualify as a custody investigator or guardian ad litem under N.D.C.C. §§14-09-06.3 and 14-09.06.4, a person shall provide the State Court Administrator with written credentials indicating the person satisfies the qualifications of N.D.R.Ct. Rule 8.6 and Rule 8.7.

Custody investigators must complete both forms and include a check payable to P.S.I. in the amount of \$30.00. Custody investigators must send verification of training, a copy of your resume, completed roster form, and a background check form.

Guardian ad litem's must send a completed roster form and verification of training.

If you have any questions, please contact Marilyn Moe at 328-2198.

Application for Criminal Background Check

Last Name	First Name	Middle Name	Maiden Name or Other Names Used
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Date of Birth	Social Security #	Driver's License # & State
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Sex	Height	Weight	Color Eyes	Color Hair
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Marital Status	Name of Spouse	Telephone #
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Home Address for the Last Seven Years (List Current Address First):

1. _____
_____ County of _____
_____ From (years) _____ To (years)
2. _____
_____ County of _____
_____ From (years) _____ To (years)
3. _____
_____ County of _____
_____ From (years) _____ To (years)
4. _____
_____ County of _____
_____ From (years) _____ To (years)
5. _____
_____ County of _____
_____ From (years) _____ To (years)

Have you every been convicted of a criminal offense? Yes No

If yes, give full details, including dates and locations: _____

I certify that all statements herein are complete and correct, and agree that (a) former employers, colleges, and universities are authorized to furnish information concerning this application, and are released from all liability for furnishing such information; (b) that I may be checked through P.S.I. , Department of Human Services, including a request to the Department of Motor Vehicles, Division of Drivers Licenses, for a list of all violations of the motor vehicle code; and, (c) that any misrepresentation or omission made by me in this application or any supplement hereto will be sufficient grounds for immediate termination.

I hereby authorize the addressed Police Departments and courthouses to furnish any criminal or traffic violations information they may have on record or otherwise and do hereby release the addressed institution and all individuals connected therewith from all liability for damage whatsoever incurred in furnishing such information.

APPLICANT'S SIGNATURE

DATE

Custody Investigator/Guardian ad Litem Roster Form

Name: _____

Address: _____

City _____ State _____ Zip Code _____

Telephone: _____

Fax: _____

Email: _____

Custody Investigator Guardian ad litem

Date(s) of Training: _____

Location: _____

Instructor: _____

Location: _____

Instructor: _____

Education background:

College Degree: _____

(Custody Investigator applicants only)

List experience in the delivery or supervision of child care or children's services:

Total Training Hours credited: _____

Approximate number of hours served in this field: _____

What District's are you willing to serve: _____

Please return a copy of your resume, certificate of trainings, and form to:

Marilyn Moe
State Court Administrator's Office
600 East Boulevard Ave., Dept. 180
Bismarck, ND 58505-0530