



**STATE OF MAINE  
JUDICIAL BRANCH  
GUARDIAN AD LITEM MENTOR APPLICATION**

*The Chief Judge of the District Court will accept applications periodically based on the operational needs of the Pilot Project, including demand for services, availability of mentors, and budget constraints.*

*For more information contact  
the Family Division at [galadministrative@courts.maine.gov](mailto:galadministrative@courts.maine.gov) or call (207) 213-2865.*

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First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Other names by which you have been known: \_\_\_\_\_

\* Business Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**\* The address listed above may be included on a GAL mentor roster. This information will be shared with others.**

Business Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Telephone: \_\_\_\_\_

Business Email: \_\_\_\_\_

**ADA Notice:** The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, [accessibility@courts.maine.gov](mailto:accessibility@courts.maine.gov), or a court clerk.

**Language Services:** For language assistance and interpreters, contact a court clerk or [interpreters@courts.maine.gov](mailto:interpreters@courts.maine.gov).

## Qualifications for Placement on the Maine GAL Mentor Roster

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To qualify for the Maine Judicial Branch (MJB) Guardian ad Litem (GAL) Mentor Roster, you must be a presently rostered GAL. Members of the GAL Review Board are not eligible for the GAL Mentor Roster.

1. Please indicate the year you became a rostered GAL: \_\_\_\_\_
2. Please indicate which case types you are eligible for appointment:
  - ☐ Title 19-A only
  - ☐ Title 22 only
  - ☐ Both Titles 19-A and 22
3. Please indicate which case types you have served as a GAL:
  - ☐ Divorce
  - ☐ Child Protection
    - ☐ I have participated in all stages of a child protection case
    - ☐ I have not participated in all stages of a child protection case
  - ☐ Parental Rights & Responsibilities
  - ☐ Guardianship
  - ☐ Adoption
  - ☐ Family Matter Termination of Parental Rights
  - ☐ Juvenile
  - ☐ Guardian for Minor or Incompetent Person, M.R. Civ. P. 17(b)
4. Have you been convicted of a crime in Maine or any other jurisdiction?
  - ☐ Yes ☐ No
5. Have you ever been substantiated for abuse or neglect by the Maine Department of Health and Human Services or an equivalent agency or been a party to a child protection case in any jurisdiction (this does not include acting as a GAL)?
  - ☐ Yes ☐ No
6. Have you ever been the subject of a motion to remove, had a complaint filed against you, or been disciplined by any professional licensing agency, including the Maine Guardian ad Litem Review Board Complaint System, or its equivalent in another jurisdiction?
  - ☐ Yes ☐ No

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7. Have you ever been removed from or surrendered your placement on the Maine GAL Roster or been removed by or surrendered a professional license to any other licensing board?  
☐ Yes ☐ No
8. Have you ever had an application to practice as a GAL denied in Maine or any other jurisdiction?  
☐ Yes ☐ No
9. Have you ever been a defendant in a protection from abuse action or to a similar cause of action in Maine or in any other jurisdiction?  
☐ Yes ☐ No

**If you answered “yes” to any of the above questions, please provide the following:**

- Name, address, and telephone number of the organization or entity taking the action;
- The action taken and the date;
- The reason for the action;
- The name of the case, including docket number; and
- A description of the basis for the action.

*Please use a separate piece of paper and include in your answer any additional information that you believe would be helpful in evaluating your application for placement on the GAL Roster.*

## Courts

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In which courts have you served as a GAL?

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## Employment History

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- ☐ By checking this box, you are confirming that you have attached a curriculum vitae to this application.

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## Interest in GAL Mentor Program

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Please briefly explain your interest in serving as a GAL mentor.

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## Affirmations, Conditions of Application

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I certify that the information provided by me in connection with this application is, to the best of my knowledge and belief, true, accurate and complete. I understand that any misrepresentation in my application may constitute a basis for the rejection of my application.

I affirm that, if rostered on the GAL Mentor Roster, I will comply with the Administrative Order JB-25-01, the Maine Judicial Branch Code of Conduct, the Maine Rules for GALs, including Rule 10's Continuing Professional Education Credits, relevant state law, and any other applicable policies related to GALs in the Maine courts.

I hereby affirm that the information provided by me on this application form is accurate and complete under penalty of law.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**IMPORTANT NOTICE:** You must email your application to the Family Division Office at:  
[galadministrative@courts.maine.gov](mailto:galadministrative@courts.maine.gov).

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