

In-Service Verification



*South Dakota Unified Judicial System
Recruitment Assistance Pilot Program*

Date [Enter a date]
Year in Program:

Your Name
Phone [000-000-0000]
Fax [000-000-0000]

TO Suzanne Starr
Director of the Division of Policy
State Court Administrators Office
Unified Judicial System
500 East Capitol Avenue
Pierre, SD 57501
Phone (605) 773-3474

Contracted County: Enter Name of County Here

Week #	Dates	Total Hours Worked in Week
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
Total Weeks Where 35 hours were not met, limit of three weeks a year:		

List dates when leave was used during time period (limited to 21 days total yearly)		
Total days used:		

1. Are you residing in the County that you agreed to provide services to under the Recruitment Assistance Pilot Program contract, herein after referred to as contract? Yes No
2. Are you currently licensed as an attorney by the South Dakota Supreme Court? Yes No
3. Are you in good standing with the South Dakota Bar Association? Yes No
4. Do you currently maintain professional malpractice insurance as agreed upon in the contract? Yes No
5. Have you changed your professional malpractice insurance since the last In-Service Verification (ISV)? If so, provide a Certificate of Insurance showing continuous coverage in the amount required. Yes No
6. Have you been disbarred, suspended, or publicly censured from the practice of law in any jurisdiction since your last ISV? If so, attach a brief explanation of the event separately. Yes No
7. Have you received any payments from UJS, State Bar, or the County under the terms of this contract? If so, please provide a description of the funds, date paid, amount, and by which entity. Yes No
8. Have you completed any pro bono hours this quarter? Yes No If yes, how many hours? _____

Signature of Attorney Participating in Recruitment Assistance Pilot Program

Date

Signature of Suzanne Starr, Unified Judicial System

Date