

**SUPERIOR COURT OF CALIFORNIA
COUNTY OF KERN**



**COURT APPOINTED MEDICAL EXAMINER
ADULT PANEL APPLICATION**

Please include a current curriculum vitae/resume; license to practice; proof of malpractice insurance; and copy of a valid identification card in addition to this application.

Name: _____ Place of Business: _____

Address: _____ City: _____ Zip Code: _____

Email: _____ Phone: _____

License Number: _____ License Type: ☐ Psychiatry ☐ Psychology

License Issue Date: _____ License Expiration Date: _____

1. Education: *(College degree(s), graduate degree(s), etc.)*

2. Post-doctorate experience in forensic psychiatry and/or psychology: *(Internship, residency, fellowship, etc.)*

3. Have you ever served on an evaluation panel in another court? ☐ No ☐ Yes

If yes, please list which courts and what type of panel (e.g. adult or juvenile, competency, WIC 361.5(c)(1)):

4. Specific experience with evaluations for mental competency, insanity, sexual violent predator status, and/or other criminal law related evaluations:

5. Do you have any prior or pending disciplinary action against you by a professional licensing agency in any state? ☐ No ☐ Yes

If yes, please attach explanation with dates, including whether the action affected the status of your license.

6. Have you ever been convicted of a crime? ☐ No ☐ Yes

If yes, please include the nature of the crime, the date of the offense and date of conviction, and the venue.

7. Are you fluent in a language other than English? ☐ No ☐ Yes

If yes, please list language(s):

CERTIFICATION

I understand and acknowledge that the selection and appointment of medical examiners is solely at the discretion of the court. I hereby certify that all statements made in this entire application, including attachments, are true and complete to the best of my knowledge. I understand that any false, incomplete, or incorrect statement, regardless of when it is discovered, may result in my disqualification or dismissal from the approved list of providers.

Date: _____

Signature: _____

Mail Application to: Attention Executive Administrative Secretary
Kern County Superior Court, 1415 Truxtun Avenue, Bakersfield, CA 93301