

SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF NEVADA

JUVENILE COURT

CERTIFICATION OF COMPETENCY

I, _____
Name Office Address Telephone No.

am an attorney at law licensed to practice in the State of California. My State Bar Number is _____. I hereby certify that I meet the minimum standards for practice before a Juvenile Court set forth in California Rules of Court, Rule 5.660, and Local Rules 6.00, et seq, and that I have completed the minimum requirements for training, education and/or experience as set forth below.

Training and Education: (Attach copies of MCLE certificates or other documentation of attendance)

Course Title	Date Completed	Hours	Provider

Juvenile Dependency Experience:

Case #	# Contested Hearings	Date of Last Appearance	Party Represented

Dated

Signature