



Twentieth Judicial Circuit Registry of Expert Witnesses



Chief Judge's List of Available Mental Health Professionals who have Completed the Approved Training as Experts

Personal Name: _____

Physical Address: _____

E-mail/Internet Address: _____

Phone/Fax/Mobile: _____

Entity Name/Tax ID: _____

I. Please read, complete, and initial the following:

- _____ I am qualified under Fla. Stat. §916.115 to be appointed as an expert to determine the mental condition of a defendant in a criminal case.
- _____ I am qualified under Fla. Stat. §985.19 to be appointed as an expert to determine the mental condition of a child.
- _____ I have completed a training program approved by the Department of Children and Families to perform the evaluations.
- _____ I have attached an up-to-date and accurate curricula vitae, as specified in AOSC17-12.

Adult Competency

II. Indicate your Qualification(s) and Locations that you Agree to be Appointed:	Lee	Collier	Charlotte	Hendry	Glades
1) Psychiatrist					
2) Licensed Psychologist					
3) Other Physician					
4) Other as specified: _____					

Juvenile Competency

III. Indicate your Qualification(s) and Locations that you Agree to be Appointed:	Lee	Collier	Charlotte	Hendry	Glades
1) Psychiatrist					
2) Licensed Psychologist					
3) Other Physician					
4) Other as specified: _____					

IV. Declaration:

I hereby apply to have my name placed on the List of Available Mental Health Professionals who have Completed the Approved Training as Experts. I will accept appointments as set forth above, and I hereby declare that I meet the minimum qualifications for service as set forth under Fla. Stat. §916.115 and/or §985.19. I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqualify me from service, and may be grounds for removal from the list at a later date. Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true.

Signature

Date: _____

Professional License Number(s)

Submit original to: **Office of the Chief Judge**
1700 Monroe Street
Fort Myers, Florida 33901

And, Fax or E-mail copy to: Attn: Court Innovations -Fax: (239) 533-1796; E-mail: efishbeck@ca.cjis20.org