

### **State of New Hampshire**

# OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION DIVISION OF LICENSING AND BOARD ADMINISTRATION

7 Eagle Square, Concord, NH 03301-2412 Phone: 603-271-2152

### Guardian ad Litem Board

#### REINSTATEMENT APPLICATION CHECKLIST

Include this checklist when submitting your application. This is a checklist only. Consult Chapter Gal 400 of the Board's administrative rules for specific requirements relative to reinstatement applications. All forms are located on the board's website <a href="https://www.nh.gov/gal">www.nh.gov/gal</a>.

1. Name of Applicant:		
2.		A check for application fee of \$150.00 payable to "Treasurer, State of New Hampshire". ant to Gal 304.01 (c)]
3.		"Reinstatement Application for GAL Certification" – Original (signed and dated) & 1 copy. ant to Gal 401.03 (b)]
4.	Requir	ed supporting documents:
	a.	A fully executed "Criminal Records Release" with notarized signature. [Pursuant to Gal 401.10 (a)]. Section II should be completed as Guardian ad Litem Board, 7 Eagle Square, Concord NH 03301 as the recipient. The form is available at http://www.nh.gov/safety/divisions/nhsp/ssb/crimrecords/documents/dssp256.pdf.
	b.	An original copy of Central Registry confirmation. [Pursuant to Gal 401.10 (c)]. The form is available for download at Central Registry   New Hampshire Department of Health and Human Services (nh.gov)
	c.	1 copy of a photo ID or other government with applicant's photo, name and Date of Birth. [Pursuant to 401.10 (d)]
	d.	An original copy of completed GAL Form "Waiver of Confidentiality". [Pursuant to Gal 401.10 (e)]
	e.	An original copy of separate attached document(s) if a Yes answer to <i>Part E: Professional Record and Ethics, section 1,</i> and pursuant to Gal 401.10 (f); and
		1 1 copy of the order, decision, or writing, if any, [Pursuant to Gal 401.10 (f) (1)]; and

		21 copy of the order, decision, or writing, if any, [Pursuant to Gal. 401.10 (f) (2)].
	f.	1 copy of the settlement or agreement if the request for reinstatement is part of/or is covered by a settlement or agreement with the board. [Pursuant to 401.10 (g)]
	g.	1 copy of the board's acceptance of the resignation or surrender pursuant to Gal 404.02 if the request for reinstatement is a result of the most recent certification ending as a result of a resignation or surrender of certification. [Pursuant to 401.10 (h)]
	h.	1 Copy of any board requested information, pursuant to Gal 401.10 (i).
	i.	A request for approval if the applicant is, at the time of his or her application, seeking approval of an activity listed in Part C: Recent Education, section 6.a. [Pursuant to 401.10 (j)]
	j.	An original copy of a signed written statement explaining why the applicant is seeking reinstatement. [Pursuant to 401.10 (k)]
5.	(a) (1)	The application is signed, dated, and applicant's name is legibly printed. [Pursuant to $401.04 - (3)$ ]

Note: Your reinstatement application is not considered complete until the board receives all required documents.

Send application and supporting materials to:

Guardian ad Litem Board 7 Eagle Square Concord, N.H. 03301

Questions: Call 603-271-2152



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### Guardian ad Litem Board

### **Reinstatement Application for GAL Certification**

#### Instructions:

- 1. This form shall be used for applicants whose certification has expired, been suspended or revoked (see Gal 401.02).
- 2. Applicants seeking renewal of certification shall **not** complete this form, but rather, complete and submit the "Renewal Application for GAL Certification".
- 3. Attach additional sheets if needed including referenced Part title and Section number.
- 4. Complete all sections **legibly** and in ink with the requested information. Applicant must fill in "NA" if the question is not applicable.
- 5. Enclose check(s) for all required fees.

Par	rt A: Personal Data			
1.	Full Name: First:	Middle:	Last:	
2.	Other names (including maiden) recent including dates used:	by which applicant l	as been known since submitting h	is or her most
	a. <i>Name:</i>		_Dates used:	
	b. <i>Name</i> :		_Dates used:	
	c. <i>Name</i> :		_Dates used:	
3.	Address of Guardian ad Litem's	Business -		
	a. Number & Street:			
	b. Town/State:		Zip Code:	



4.	. Mailing address of Guardian ad Litem's Business (if different than above) –				
	a.	Number & Street:			
	b.	Town/State:	Zip Code:		
5.	Applic	ant's guardian ad litem business email address:			
6.	Teleph	one number of Guardian ad Litem business:			
Pai	rt B: Re	cent Employment History			
		of applicant's present employer, if any, including so	olf amployment:		
1.	Name (	of applicant's present employer, if any, including so	en-employment.		
	a. Ad	dress of the applicant's present employer:			
		Number & Street			
		Town/State/Zip Code	Telephone		
Pai	Part C: Recent Education				
1.	. Has the applicant, within the last three years, completed the required 30 hours of continuing education?				
		Yes No			



Title of activity	Brief description of topics	Date of Participation	Name of person or sponsoring organization	# of claimed CE credits
a.				
b.				
c.				
d.				
e.				
			Total # of claimed CE cr	redits:
-	-	-	edits claimed that relate to ion of those paragraphs:	service as an
Has the applicant, in	n accordance with Gach would serve to veri	1 403.09, retained ify:	in his or her possession such	
b. The number	of credits claimed?			
	Yes	No		
c. The applica certification	_	ticipation in the a	ctivity within the expiring	period of
•	Yes	No		



a.	
b.	
c.	
d.	
e.	
•	activity listed in question 2 above is not one of the specific types of activity listed in Gal, provide:
a.	A description of the activity:
b.	Whether or not the activity has been approved for continuing education credit under Gal 403.05 and Gal 403.06:
	Yes No
c.	If the answer to 6. b. above is Yes, provide the date of approval:
d.	If the activity was not previously approved for continuing education under Gal 403.05 and Gal 403.06, has the applicant submitted a request for approval described at Gal 403.06?



Yes No	
Part D: Certification Status	
1. Provide the beginning and end dates of the applicant's most recent certification:	
a. Beginning date:	
b. End date:	
2. If the applicant was formerly certified by the board, provide the following information:	
a. Is the applicant's most recent certification, its expiration or the request for reinstatement subject to the terms of any settlement or agreement with the board?	
Yes No	
b. Did the applicant's most recent certification expire while under a period of suspension?	
Yes No	
c. If the applicant's most recent certification was revoked by the board, has the applicant ev previously had his or her certification revoked and reinstated by the board?	er
YesNo	
d. If the request for reinstatement follows a resignation or surrender of the applicant's most recent certification, provide the date that the resignation or surrender was approved by the board:	e
e. If the request for reinstatement follows a previous unsuccessful attempt to renew the applicant's most recent certification, provide the date of that unsuccessful attempt:	
f. If the applicant's most recent certification was revoked by the board, on a separate piece of paper submit a written request for a hearing on reinstatement.	<u>of</u>



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#### Part E: Professional Record and Ethics

1.	. Have any of the applicant's answers to the "Professional Records and Ethics" questions on the most recent application changed since filing the most recent application?			
		Yes No		
2.	If the ar	nswer to question 1 above is Yes, attach a separate piece of paper providing:		
	a.	Name;		
	b.	Address;		
	c.	Telephone number of organization;		
	d.	Docket Number;		
	e.	Type of action taken;		
	f.	Date of action:		
	g.	A description of the facts giving rise to the action;		
	h.	A description of the reason for such action, including whether it was claimed applicant engaged		
		in misconduct in performance of his or her GAL duties, or that applicant was not of good		
		character; and		
	i.	The procedural history of the matter, including whether the action was reversed or overturned		
		on appeal.		
Pa	rt F: Otl	her Information		
	111.00			
1.		applicant ever, since the last filing of an application, been a party to any family law or domestic		
		as proceeding, or any other non-criminal court case, proceeding or action of any type, in this or		
	-	her jurisdiction, including but not limited to any civil, equity, landlord/tenant, probate,		
	_	ptcy, forfeiture or other action, proceeding or matter of any type whatsoever, other than traffic		
	-	ing offenses charged as a violation or cases in which the person served solely in the capacity of		
	a guard	lian ad litem?		
		Yes No		
2.	If the ar	nswer to question 1 above is Yes, attach a separate piece of paper providing:		
	a.	The name and docket number of the case;		
	b.	The name of the court in which the matter was pending:		

c. The date that the matter was initiated; d. A description of the nature of the case; and



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e. Whether the matter is still pending.

#### 3. The applicant certifies that:

- a. The information provided by the applicant on or in connection with the application form is, to the best of the applicant's knowledge and belief, true, accurate and complete and the documentation provided in support of the application is a true and complete version of the documentation submitted;
- b. The applicant acknowledges that the information provided on the application form and the documentation provided to support the application is public information except to the extent exempted from public disclosure pursuant to RSA 91-A, court order, RSA 490-C or orders issued thereunder;
- c. The applicant specifically acknowledges that any and all information submitted to the board may be divulged by the board to any potential appointing court as well as to such other entities or persons as provided for by these rules or other law, including the New Hampshire judicial branch family division; and
- d. The applicant acknowledges that, pursuant to RSA 641:3, knowingly making a false representation on the application form is punishable as a misdemeanor.

Applicant's Signature	Date		
D ' ( ) I			
Print Name			