

## Assigned Counsel Program

Michelle Parker, Executive Director/Chief Defender

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## **EXPERT DISCLOSURE FORM**

Please answer all questions fully. Information shall be made available only to Erie County Assigned Counsel Program personnel, representing counsel, and, if directed or required by law, to Prosecuting Attorneys and judicial personnel. If you lack information relevant to any of the questions below, please indicate "Not Ap alo apo

## DA

12. Board certified as a specialist in this field:

13. Length of time certified as a specialist:

| oplicable." To the extent your disclosures require submission of documents, please scan and e-mail the same ong with this form. All documents may be returned to Amber Poulos, Deputy for Forensics, oulos@assigned.org. |
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| ATE OF DISCLOSURE:                                                                                                                                                                                                       |
| 1. Name:                                                                                                                                                                                                                 |
| 2. Date of Birth                                                                                                                                                                                                         |
| 3. Current business address:                                                                                                                                                                                             |
|                                                                                                                                                                                                                          |
| 4. Best contact telephone number:                                                                                                                                                                                        |
| 5. Best contact e-mail address:                                                                                                                                                                                          |
| 6. Occupation:                                                                                                                                                                                                           |
| 7. What academic degrees are held and from where and when obtained:                                                                                                                                                      |
|                                                                                                                                                                                                                          |
| 8. Specialized degrees and training.:                                                                                                                                                                                    |
| 9. Licensing in field, and in which state(s):                                                                                                                                                                            |
|                                                                                                                                                                                                                          |
| 10. Length of time licensed:                                                                                                                                                                                             |
| 11. Length of time practicing in this field:                                                                                                                                                                             |

| 14. Positions held since completion of formal education, and length of time in each position:                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 15. Current place of employment:                                                                                                                                                                                 |
| 16. Present title/position held:                                                                                                                                                                                 |
| 17. Length of time at current position:                                                                                                                                                                          |
| 18. Briefly describe the subject matter of your specialty:                                                                                                                                                       |
| 19. Specializations within that field:                                                                                                                                                                           |
| 20. Duties and function of current position:                                                                                                                                                                     |
| 21. Whether conducted personal examination or testing of (subject matter/ person/instrumentality):                                                                                                               |
| 22. Number of these tests or examinations conducted by you and when and where were they conducted:                                                                                                               |
| 23. Teaching or lecturing by you in your field: a. When, where and what subjects:                                                                                                                                |
| <ul><li>24. Publications by you in this field and titles:</li><li>a. When and what subjects:</li></ul>                                                                                                           |
| <ul><li>25. Membership in professional societies/associations/organizations, and special positions in them:</li><li>a. Requirements for membership and advancement within each of these organizations:</li></ul> |
| 26. Honors, acknowledgments, and awards received by you in your field:                                                                                                                                           |

| 27. Any professional discipline or suspensions related to employment or independent contractor relationship If so, please explain below:                                                  | S.  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                                                                                                                                                                                           |     |
| 28. Any convictions of anything other than a vehicle and traffic ticket ex: Misdemeanors; Felonies If yes, please provide all documents related to the issue, including the final outcome |     |
| 29. How many times have you been retained as an expert:                                                                                                                                   |     |
| 30. What area of practice/specialties have you been retained on:                                                                                                                          |     |
| 31. What % by a Civil Plaintiff:                                                                                                                                                          |     |
| 32. What % by the Civil Defense:                                                                                                                                                          |     |
| 33. What % by the Criminal Prosecution:                                                                                                                                                   |     |
| 34. What % by the Criminal Defense:                                                                                                                                                       |     |
| 35. How many times have you been deposed as an expert:                                                                                                                                    |     |
|                                                                                                                                                                                           |     |
| 36. When was the last time you had your deposition taken:                                                                                                                                 |     |
| 37. Number of times testimony has been given in any court as an expert witness in a field/specialty:                                                                                      |     |
|                                                                                                                                                                                           |     |
| 38. Please provide all transcripts of prior testimony, whether in person or deposition, in your possession                                                                                |     |
| 39. Have you ever been found to be not credible by a court/administrative law judge/arbiter please provide a transcripts in your possession:                                              | .11 |
| a. If yes, please provide the name of the case, date, and location of your testimony                                                                                                      |     |
| 40. Are you available for consulting to any party, state agencies, law enforcement agencies, defense attorneys:                                                                           |     |
| 41. What services do you offer:                                                                                                                                                           |     |
| 42. What is your hourly rate to consult:                                                                                                                                                  |     |
| 43. What is your hourly rate to provide deposition testimony:                                                                                                                             |     |

| 45. Other fees: |  |  |
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44. What is your hourly rate to provide trial testimony: