



2017 Temporary Judge Schedule

Attorney Name: _____

Assistant Name: _____ Telephone Number: _____

Fax Number: _____ Email Address: _____

(WEDNESDAY)	(WEDNESDAY)
<p>April 26 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>May 3 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>May 10 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>May 17 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>May 24 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>May 31 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>June 7 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>June 14 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p>	<p>June 21 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>June 28 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>July 5 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>July 12 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>July 19 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>July 26 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>August 2 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>August 9 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p> <p>August 16 <input type="checkbox"/> 9:00 a.m. to 12:00 p.m. <input type="checkbox"/> 1:30 p.m. to 5:00 p.m.</p>

Please indicate your areas of specialization, check all that apply:

- | | | |
|---|---|--|
| <input type="checkbox"/> BL – Business Litigation | <input type="checkbox"/> IPL – Intellectual Property Litigation | OTHER: <div style="border: 1px solid black; width: 150px; height: 80px; display: inline-block;"></div> |
| <input type="checkbox"/> CDL – Construction Defect Litigation | <input type="checkbox"/> PI – Personal Injury | |
| <input type="checkbox"/> CL – Communications Litigation | <input type="checkbox"/> PM – Professional Malpractice | |
| <input type="checkbox"/> ED – Eminent Domain | <input type="checkbox"/> RPL – Real Property | |
| <input type="checkbox"/> EP – Employment Practices | <input type="checkbox"/> T - Torts | |
| <input type="checkbox"/> MM – Medical Malpractice | | |

Print completed form for your records. Save completed form and submit via email to tjp@scscourt.org