

OAKLAND COUNTY CRIMINAL ASSIGNMENT SYSTEM – ADMINISTRATIVE ORDER 1996-02
PETITION FOR RECLASSIFICATION OF CRIMINAL ASSIGNMENT CATEGORY

Name: _____ Business Address: _____

Bar Number (if applicable): _____

Telephone Number: _____

Fax Number: _____

I hereby request my eligibility to receive criminal assignments be changed from Category _____ to Category _____ based upon the following reason(s):

Signature: _____ Date: _____

The *Oakland County Circuit Court* provides access and special services for the physically handicapped and disabled. If you need help or have questions about these services, please contact the Office of the Court Administrator at (248) 452-2159.

TO BE COMPLETED BY THE CRIMINAL ASSIGNMENT COMMITTEE

Review Date: _____ Number of Criminal Cases Tried: _____

- Petitioner is qualified to receive Category I assignments involving capital offenses
- Petitioner is qualified to receive Category II assignments involving major felony offenses
- Petitioner is qualified to receive Category III assignments involving high misdemeanors/felony offenses

Authorizing Signature

Date