



## Peer Review Committee Expression of Interest

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I am interested in consideration for appointment to the Peer Review Committee of the Attorney Grievance Commission of Maryland for a two (2) year term and that I meet the requirements set forth below.

I also understand that Panel Meetings are to be held *within sixty (60) days* of a Panel assignment. Furthermore, I understand that Panel recommendations must be made *within ninety (90) days* of the appointment of the Panel.

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Lawyer member

Non-Lawyer member

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Printed Name

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Date

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Signature

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### Lawyer Member Requirements:

1. Must be admitted by the Court of Appeals to practice law in Maryland;
2. Must have actively and lawfully engaged in the practice of law in Maryland for at least five (5) years;
3. Must not be a judge of a court of record;
4. Must not be the subject of a pending statement of charges or a petition for disciplinary or remedial action; and
5. Must not have ever been disbarred or suspended by the Court of Appeals or by a disciplinary body or court of the United States or any other state.

### Non-Lawyer Member Requirements

1. Must not have been convicted of a serious crime and the conviction not reversed or vacated; and
2. Must not be a complainant in a pending matter against an attorney under the Rules governing the peer review process.

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### Submission Instructions

Please return with *Confidential Questionnaire* form to:

**Deborah L. Potter, Esquire**  
Chair, Peer Review Committee  
Attorney Grievance Commission of Maryland  
16701 Melford Blvd.  
Suite 421  
Bowie, MD 20715  
dpotter@agcpeerreview.com





# Peer Review Committee Confidential Questionnaire (Lawyer)

## Background Information

Have you ever been a State's Attorney:  Yes  No

From: \_\_\_\_\_ To: \_\_\_\_\_

Have you ever been a U.S. Attorney:  Yes  No

From: \_\_\_\_\_ To: \_\_\_\_\_

Have you ever been in-house counsel for a private business:  Yes  No

From: \_\_\_\_\_ To: \_\_\_\_\_

## Preferences

Will you accept a panel assignment that may take more than two (2) days?  Yes  No

Will you accept a panel assignment that requires travel?  Yes  No  
If yes, how far?  20 miles  50 miles  100+ miles

## Professional Interests

Please check the items that apply in which you have attained considerable experience:

- |   |   |
|---|---|
| <input type="checkbox"/> Accounting/Finance | <input type="checkbox"/> Construction             |
| <input type="checkbox"/> Banking            | <input type="checkbox"/> Medical/Health           |
| <input type="checkbox"/> Education          | <input type="checkbox"/> Real Estate              |
| <input type="checkbox"/> Government         | <input type="checkbox"/> Technology               |
| <input type="checkbox"/> Immigration        | <input type="checkbox"/> Telecommunications       |
| <input type="checkbox"/> Legal              | <input type="checkbox"/> Consulting (Area: _____) |
| <input type="checkbox"/> Non-Profit         | <input type="checkbox"/> Other: _____             |
| <input type="checkbox"/> Public Relations   |   |

## Voluntary Information

Race/Ethnicity:  White/Caucasian  Black/African-American  Hispanic/Latino  
 Alaskan/Native American  Asian/Pacific Islander  Other: \_\_\_\_\_

Gender:  Male  Female

Birth date: \_\_\_\_\_

## Submission Instructions

Please fill out each section completely and return the *Confidential Questionnaire* and *Expression of Interest* form to:

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