

**BACKGROUND AND STATEMENT OF
QUALIFICATIONS AS REQUIRED BY RCW**

26.12.175(3)

COVER PAGE

INFORMATION

Business Name/Firm: Sherri Rice

Phone Number: (501) 993-5643

Mailing Address:

Registry Email: ricesherri.gal@yahoo.com

Title 26 GAL

Background Information Record as required by RCW 26.12.175(3)

****This will be posted on the Benton & Franklin Counties Superior Court Website for public viewing****

I, SHERRI RICE, have the following background, knowledge, training, and experience to be on the ***Benton-Franklin Title 26 Guardian ad Litem Registry***.

- A. Highest level of formal education: 12
- B. General training related to Guardian ad Litem's duties: SEE RESUME
- C. Specific training related to issues potentially faced by children in dissolution, custody, paternity, and other family law proceedings: SEE RESUME
- D. Specific training or education related to child disability or developmental issues SEE RESUME.
ALSO, I HAVE A SPECIAL NEEDS CHILD
- E. Number of years' experience as a Guardian ad Litem: SEE RESUME
- F. Number of appointments as a Guardian ad Litem [as of today's date] and the county or counties of appointment:
 - a) Number of appointments: 0
 - b) Counties appointed in: NA
- G. I have been previously removed from a Guardian ad Litem registry pursuant to a grievance action:
 - ☒ No
 - ☐ Yes [Please explain each instance on a page and attach hereto. Include the name of the county, court and cause number(s).]
- H. I have founded allegations of abuse or neglect as defined in RCW 26.44.020:
 - ☒ No
 - ☐ Yes [Please explain each instance on a page and attach hereto.]
- I. A background check is completed annually by Benton/Franklin Counties Superior Court through Washington state patrol criminal identification section.
- J. A statement of my criminal history [as defined in RCW 9.94.A.030] for the period covering ten years prior to this date was supplied to Benton/Franklin Counties Superior Court.
- K. Other information not required by statute:
 - a. I have the following professional licenses or certifications: NA
 - b. I have the following trial experience as a GAL: NA
 - c. Other: _____

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Sherrice 9.4.2025
Signature & Date

SHERRI RICE
Printed Name