



Coordinator Mentor Program Acknowledgement Form

I _____

have read and understand the requirements of the Council of Accountability Court Judges Coordinator Mentor Program.

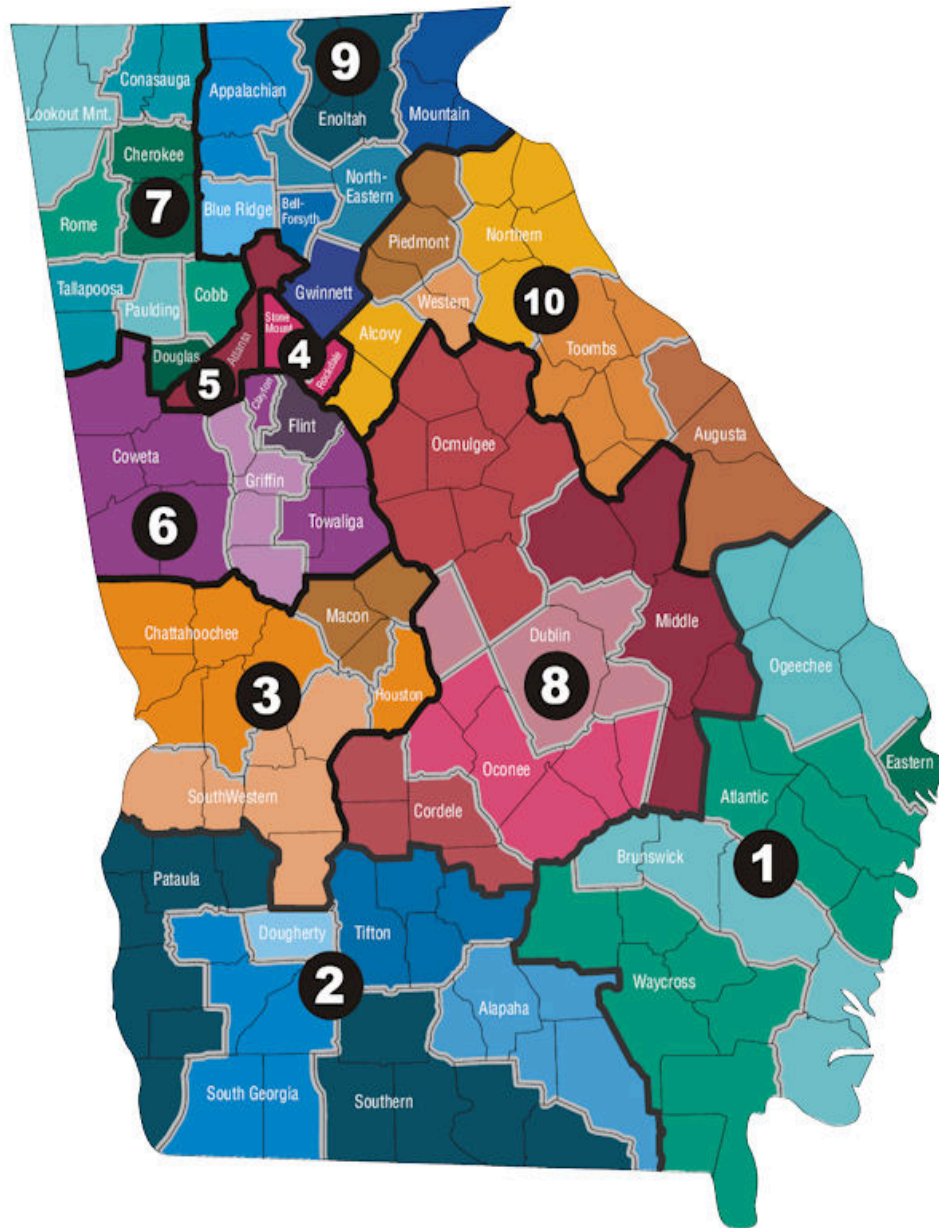
I have completed the online application to participate as a mentor/mentee.

I understand this position will require some travel and a time commitment on my behalf.

Signature of Coordinator / Date

Signature of Presiding Judge / Date

Georgia Judicial Districts & Circuits



First District:

Atlantic
Brunswick
Eastern
Ogeechee
Waycross

Second District:

Alapaha
Southern
Tifton
Dougherty
Pataula
Southern Georgia

Third District:

Chattahoochee
Houston
Macon
SouthWestern

Fourth District:

Stone Mountain
Rockdale

Fifth District:

Atlanta

Sixth District:

Coweta
Griffin
Clayton
Flint
Towaliga

Seventh District:

Cherokee
Cobb
Conasauga
Douglas
Lookout Mountain
Paulding
Rome
Tallapoosa

Eighth District:

Cordele
Dublin
Middle
Ocmulgee
Oconee

Ninth District:

Appalachian
Blue Ridge
Bell-Forsyth
Gwinnett
North-Eastern
Enotah
Mountain

Tenth District:

Alcovy
Augusta
Northern
Piedmont
Toombs
Western