



COLORADO

Commission on Judicial Discipline

Request for Evaluation of Judicial Conduct

The [Colorado Code of Judicial Conduct](#) establishes standards for the ethical conduct of judges and those seeking judicial office. A judge's conduct in the courtroom and in the community is guided by certain principles, known as the Canons, contained in the Code.

The Commission is not an appellate court and **cannot review, reverse, or modify a decision or ruling made by a judge**. A Request for Evaluation is not an appeal and does not extend the timeline within which to file an appeal. To learn more about the purpose and Constitutional jurisdiction of the Commission and the types of allegations it can investigate, please visit our website at <https://ccjd.colorado.gov/>.

The Commission has jurisdiction over all Colorado District Court Judges, County Court Judges (except Denver County), Court of Appeals Judges, and the Justices of the Colorado Supreme Court. The Commission **does not have jurisdiction** over attorneys, Magistrate Judges, Municipal Judges, Denver County Court Judges, Administrative Judges, or US Federal Judges.

The Commission will accept anonymous Requests for Evaluation via mail and email. If you choose to submit your request anonymously, please fill out the RFE pdf form below and include all information the Commission will need to evaluate your request. Please also be aware that, if you file an anonymous Request for Evaluation, the Commission will not be able to advise you of the resolution of the request. The Colorado Constitution makes the Commission on Judicial Discipline's records confidential unless and until the Commission, after evaluating a Request for Evaluation, initiates formal disciplinary proceedings.

If you have any questions, please call us at 303-457-5131 or email us at judicialconduct@jd.state.co.us. You can submit this RFE to us by email or mail to:

Colorado Commission on Judicial Discipline
1300 Broadway, Suite 210
Denver, Colorado 80203

JUDGE***REQUESTING PARTY**

Name

Name

County

Street Address or P.O. Box

Judicial Position (County, District, or
Appellate Judge)

City and State

Zip Code

Primary Phone

E-Mail Address

***Please make sure your Request for Evaluation is about a State of Colorado District or County Court Judge (except Denver County), Court of Appeals Judge, or Supreme Court Justice. If not, the Commission will not have jurisdiction over your Request.**

STATEMENT OF FACTS

1. When and where did the judge's conduct occur:
Approximate Date(s): _____
Approximate Time(s): _____
2. If your information arises out of a court case, please answer these questions:
 - a. What is the name and number of the case?
Case name: _____
Case number: _____
 - b. What kind of case is it?
 Criminal
 Family Law
 Civil
 Traffic
 Small Claims
 Probate
 Juvenile
 Other (Specify) _____
 - c. What is your involvement in the case?
 Plaintiff/Petitioner
 Defendant/Respondent
 Attorney for: _____
 Witness for: _____
 Relative of a party or witness (Relationship): _____
 Other (Specify): _____
3. Explain your concerns regarding this judge's conduct. Be specific and include all information that will help the Commission understand your concerns. You may attach a separate summary or letter, if necessary.

4. List any documents* in support of your concerns regarding this judge's conduct. There is no need to attach copies of court filings or court orders, but please identify relevant court filings/orders by the name of the document and the date the document was filed.

*If you would like to submit additional materials or information for us to consider, please send materials via email to judicialconduct@jd.state.co.us.

Signature

Date

VOLUNTARY DEMOGRAPHIC QUESTIONNAIRE

According to § 13-5.3-108(1)(g), C.R.S., the Commission is required to track the demographics of persons directly affected by potential judicial misconduct. The following questions as to your background are voluntary and optional:

Gender:	Age:	Race/Ethnicity (check any that apply):
<input type="checkbox"/> Male	<input type="checkbox"/> Under 18	<input type="checkbox"/> White
<input type="checkbox"/> Female	<input type="checkbox"/> 18-24	<input type="checkbox"/> Black or African American
<input type="checkbox"/> Non-Binary	<input type="checkbox"/> 25-34	<input type="checkbox"/> American Indian or Alaska Native
	<input type="checkbox"/> 35-44	<input type="checkbox"/> Asian
	<input type="checkbox"/> 45-54	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander
	<input type="checkbox"/> 55-64	<input type="checkbox"/> Hispanic or Latino
	<input type="checkbox"/> 65 and Over	<input type="checkbox"/> Other: _____
Disability Status:	Are you a member of the LGBTQ+ community?	
<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
<input type="checkbox"/> No	<input type="checkbox"/> No	