

**APPLICATION FOR ADMISSION TO PRACTICE  
AS AN ATTORNEY AND COUNSELOR-AT-LAW IN THE  
STATE OF NEW YORK**

**NEW YORK SUPREME COURT  
APPELLATE DIVISION**

**GENERAL INSTRUCTIONS**

Please read these General Instructions carefully and retain them for future reference.

The application for admission forms are uniform among the four Appellate Division Departments in New York State and are to be used by both applicants who have passed the New York State Bar examination and applicants applying for admission on motion without examination.

Strict compliance with these instructions is required. Incomplete, defective or carelessly prepared application papers will occasion delay and may result in the rejection of the application.

This paragraph is applicable only to applicants who have taken the New York State Bar examination. In the Second, Third and Fourth Judicial Departments, the application papers required by these instructions may be filed at any time after you have taken the Bar examination, regardless of whether or not the results of the Bar examination have been issued. In the First Judicial Department, the application papers may be filed only after you have received notification that you have passed the examination and have been certified to the First Judicial Department. The application and any further materials in connection therewith required by the Appellate Division and its Committees on Character and Fitness must be filed by you within three years from the date of the letter sent by the New York State Board of Law Examiners notifying you that you have passed the Bar examination (see 22 NYCRR 520.12).

This paragraph is applicable only to applicants for admission on motion without examination (see 22 NYCRR 520.10). The application papers required by these instructions should be filed only after you have been informed by the Appellate Division that you qualify for admission on motion.

In addition to the sanctions provided in article 210 of the Penal Law of the State of New York, any false statement contained in your papers, or any failure to disclose any material fact, may result in the denial of your application for admission; or, if you shall have been admitted before the discovery thereof, in the revocation of your license to practice law.

You must answer all questions fully, truthfully, accurately, and legibly. If the space provided is insufficient for a complete answer, the answer may be given on a rider which should be signed by you, specifying by its number the question to which it relates. Please avoid the use of riders, if possible.

Only fully completed applications will be accepted for filing. You will be furnished the following official forms to complete an application: an application for admission questionnaire, good moral character affidavits, employment affidavits, and law school certificates. When you file your application for admission, it should include the following and be arranged in the following order: (1) copy of the letter or notice of certification from the State Board of Law Examiners (further explained below); (2) application for admission questionnaire; (3) two affidavits of good moral character; (4) employment affidavits or letters (see application for admission questionnaire question number 7); (5) certificates of good standing and grievance letters from jurisdictions in which you have been admitted to practice (see application for admission questionnaire question number 10); and (6) any other papers you desire to submit.

A complete application will also include a form certificate from your law school(s); however, this form is mailed by you to the law school and then mailed directly by the law school to the appropriate Appellate Division filing office listed on the form (see application for admission questionnaire question number 5).

The Appellate Division and its Committees on Character and Fitness reserve the right to request additional information and documentation from you, other than that listed in these instructions or specifically requested in the questionnaire.

**NOTE:** You should especially have available and be prepared to submit or exhibit any or all of the following: birth certificate; certified copy of court order changing name; naturalization papers; visa and other immigration papers; copy of military honorable discharge (for example, United States form DD-214); copies of police and court records regarding any criminal matter you disclose; copies of relevant court pleadings, orders and judgments, including those pertaining to divorce and domestic relations matters; copies of bankruptcy petitions and discharges; and records concerning denials or revocations of licenses the procurement of which required proof of good character (other than Bar applications).

Letter or notice of certification from the State Board of Law Examiners. Every applicant for admission on examination must file a copy of the letter or notice from the State Board of Law Examiners certifying the applicant for admission to one of the four Appellate Division Departments. Applicants seeking admission in the First Judicial Department shall file a copy of the letter or notice with the questionnaire. Applicants seeking admission in the Second, Third and Fourth Judicial Departments shall file the letter or notice with the questionnaire unless the questionnaire is filed prior to the applicant's receipt of such letter or notice, in which event the letter or notice shall be filed promptly after the applicant's receipt thereof. The letter or notice is proof of the applicant's passage of the written Bar examination and of the Multistate Professional Responsibility Examination. Every application for admission on motion without examination must include the letter from the New York State Board of Law Examiners certifying that the applicant possesses the legal education necessary for admission on motion without examination. The requisite copy of this letter is normally provided directly to the appropriate Appellate Division Department by the State Board of Law Examiners.

Inability to comply with any of the foregoing requirements for admission must be set forth in an affidavit by you indicating any omission and stating fully the efforts made by you to fulfill the requirement.

You will be informed by letter, in a timely fashion, if documents are missing or additional information is required.

You may download the blank application forms from the website maintained by the State Board of Law Examiners at [www.nybarexam.org](http://www.nybarexam.org). Blank forms may be photocopied. After completion, only originals will be accepted for filing. You may not file completed forms electronically.

Please do not submit a copy of these instructions with your application.

### **FILING OFFICES**

Applications for admission should be filed with and all inquiries concerning admission procedures should be directed to the appropriate filing office (indicated below) of the Appellate Division Department to which you have been certified or are eligible for certification by the State Board of Law Examiners. Please make sure all mailed envelopes contain a return address.

**FIRST JUDICIAL DEPARTMENT:** Committee on Character and Fitness, Appellate Division, First Department, 41 Madison Avenue, 26<sup>th</sup> Floor, New York, New York 10010

**SECOND JUDICIAL DEPARTMENT:** Executive Secretary, Committees on Character and Fitness, Appellate Division, Second Department, 335 Adams Street, Room 2404, Brooklyn, New York 11201; Telephone: (718) 923-6360.

**THIRD JUDICIAL DEPARTMENT:** Admissions Office, Appellate Division, Third Department, P.O. Box 7350, Capitol Station, Albany, New York 12224; Express mail address: Admissions Office, Appellate Division, Third Department, Justice Building, State St., Fifth Floor, Room 511, Albany, NY 12223; Telephone: (518) 471-4778.

**FOURTH JUDICIAL DEPARTMENT:** Admissions Office, Appellate Division, Fourth Department, Suite 200, 50 East Avenue, Rochester, New York 14604.

### **CHANGES OF ADDRESS**

1. If since the time of making application to the State Board of Law Examiners for admission to the Bar examination (or for certification of your legal education for admission on motion without examination) and prior to your certification by the State Board of Law Examiners to an Appellate Division Department you change your address, you should promptly notify the Board and advise them of such change in writing (State Board of Law Examiners, Corporate Plaza, Building 3, 254 Washington Avenue Extension, Albany, NY 12203).

2. If you change your address after certification by the State Board of Law Examiners but before you are admitted, you should promptly notify the appropriate Appellate Division Department of such change by letter. The change of address should be sent to the filing office of the Appellate Division to which you are certified and/or where your application is filed.

3. After you are admitted, changes of address should be sent to the Attorney Registration Unit, 25 Beaver Street, 8th Floor, General Post Office, P.O. Box 29327, New York, New York 10087-9327.

### **TRANSFERS OF APPLICATIONS (SEE CPLR 9403)**

If, after certification by the State Board of Law Examiners but before you are admitted, you obtain a residence in another Appellate Division Department, you may request a transfer of your application to the new Department; also, if you do not reside in New York State and obtain full time employment in the State, you may request a transfer to the Department of such full time employment. You may also request a transfer on undue hardship grounds. A transfer request should be made in writing to the Appellate Division Department to which you have been certified.

### **INTERVIEWS**

All applicants are required to undergo an interview by a member or members of the Appellate Division Committees on Character and Fitness prior to admission. You will be informed, in a timely fashion, of the date and place of your interview.

### **REGISTRATION**

Before admission to the Bar, you must register with the Office of Court Administration as an attorney by filing a form registration statement and paying the \$350 biennial registration fee (see Judiciary Law § 468-a; 22 NYCRR Part 118). You will be provided the necessary forms during the admission process.

**APPLICATION FOR ADMISSION TO PRACTICE  
AS AN ATTORNEY AND COUNSELOR-AT-LAW IN THE  
STATE OF NEW YORK<sup>1</sup>**

**APPLICATION FOR ADMISSION QUESTIONNAIRE**

**TO THE APPELLATE DIVISION OF THE SUPREME COURT OF  
THE STATE OF NEW YORK:**

The undersigned hereby applies for admission to practice as an attorney and counselor-at-law in all courts of the State of New York, and in support of such application submits the following sworn statement and the accompanying affidavits and other papers.

**A. PERSONAL INFORMATION**

1. (a) State name in full \_\_\_\_\_  
(First) (Middle) (Last)

(b) Have you ever used or been known by any other name? \_\_\_\_\_

If so, state in full each name (other than the name above given) which you have used or by which you have at any time been known, the period of, and the reasons for, the use of each such name; if change of name is by marriage, so state; if change of name was by court order, so state.

\_\_\_\_\_

(c) Social Security number \_\_\_\_\_

2. State the following:

(a) Age, date, and place of birth \_\_\_\_\_

(b) Are you a citizen of the United States? \_\_\_\_\_

If you are not a citizen of the United States, state your immigration status. \_\_\_\_\_

\_\_\_\_\_

3. Present residence (full mailing address).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(residence telephone) \_\_\_\_\_

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1. Please check one of the following: this is an application for Admission on Examination \_\_\_ or Admission on Motion without Examination \_\_\_. Please see the General Instructions for guidance on filing complete applications.

Office address (if applicable) (full mailing address).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(office telephone) \_\_\_\_\_

E-mail address (if any) \_\_\_\_\_

4. Prior residences.

List all prior temporary and permanent residences since you reached the age of 21 or during the past ten years, whichever period is shorter. Include college residences, military addresses, and temporary residences of more than six months duration away from home for educational, business or other special purposes. Provide a chronological continuous residence listing (from earliest to latest) without interruption.

Period: From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_  
Address (street and number) \_\_\_\_\_  
City, Village or Town, and County \_\_\_\_\_  
State and Country \_\_\_\_\_ Zip Code \_\_\_\_\_

\* \* \*

Period: From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_  
Address (street and number) \_\_\_\_\_  
City, Village or Town, and County \_\_\_\_\_  
State and Country \_\_\_\_\_ Zip Code \_\_\_\_\_

\* \* \*

Period: From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_  
Address (street and number) \_\_\_\_\_  
City, Village or Town, and County \_\_\_\_\_  
State and Country \_\_\_\_\_ Zip Code \_\_\_\_\_

\* \* \*

Period: From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_  
Address (street and number) \_\_\_\_\_  
City, Village or Town, and County \_\_\_\_\_  
State and Country \_\_\_\_\_ Zip Code \_\_\_\_\_

**B. EDUCATION**

5. List all colleges, universities and professional schools (including law schools) attended. If you did not receive a degree, state the reason.

FORM LAW SCHOOL CERTIFICATES: For each law school listed, send the law school the form law school certificate which the law school should complete and return directly to the Appellate Division.

\* \* \*

College \_\_\_\_\_ Degree \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State or Country \_\_\_\_\_  
Dates of Attendance: From \_\_\_\_\_ To \_\_\_\_\_

\* \* \*

College \_\_\_\_\_ Degree \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State or Country \_\_\_\_\_  
Dates of Attendance: From \_\_\_\_\_ To \_\_\_\_\_

\* \* \*

Law School \_\_\_\_\_ Degree \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State or Country \_\_\_\_\_  
Dates of Attendance: From \_\_\_\_\_ To \_\_\_\_\_

\* \* \*

Law School \_\_\_\_\_ Degree \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State or Country \_\_\_\_\_  
Dates of Attendance: From \_\_\_\_\_ To \_\_\_\_\_

\* \* \*

6. (a) Have you ever been denied admission to any school, college, law school, or other similar institution for stated cause which might reflect upon your character? \_\_\_\_\_.

(b) Have you ever been placed on probation, dropped, suspended, expelled or otherwise been subjected to discipline by any institution of learning above elementary school level for conduct which might reflect upon your character? \_\_\_\_\_.

(c) Have you ever been requested or advised by any college, law school, or other professional or graduate school for any reason to discontinue your studies therein? \_\_\_\_\_.

If your answer is "Yes" to (a), (b) and/or (c), give the name of any such institution and state fully the circumstances and date of each such occurrence. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**C. EMPLOYMENT**

7. (a) List every employment you have had since you reached the age of 21, in chronological order (from earliest to latest). Include self-employment, clerkships, temporary or part-time employment, military service, employment by members of family or other relatives, employment with or without monetary compensation, law-related work-study employment, and law-related

employment for academic credit only.

FORM AFFIDAVITS AS TO APPLICANT'S LAW-RELATED EMPLOYMENT AND/OR SOLO PRACTICE: For each law-related employment or period of solo law practice listed in reply to this question, please submit a form affidavit. If you have not had any substantial law-related employment, submit a letter addressed to the Appellate Division on the letterhead of your present employer, or if you are not presently employed, from your last employer, giving (a) the nature of the services you rendered, (b) the period of employment, (c) the reason you left, and (d) a brief evaluation of your character.

Period: From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_  
Name of Employer \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_  
Employer's Telephone \_\_\_\_\_  
Nature of Employer's Business \_\_\_\_\_  
Position or Positions Held \_\_\_\_\_  
Reason for Leaving or Termination \_\_\_\_\_

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Period: From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_  
Name of Employer \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_  
Employer's Telephone \_\_\_\_\_  
Nature of Employer's Business \_\_\_\_\_  
Position or Positions Held \_\_\_\_\_  
Reason for Leaving or Termination \_\_\_\_\_

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Period: From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_  
Name of Employer \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_  
Employer's Telephone \_\_\_\_\_  
Nature of Employer's Business \_\_\_\_\_  
Position or Positions Held \_\_\_\_\_  
Reason for Leaving or Termination \_\_\_\_\_

\* \* \*

Period: From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_  
Name of Employer \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_

Employer's Telephone \_\_\_\_\_  
Nature of Employer's Business \_\_\_\_\_  
Position or Positions Held \_\_\_\_\_  
Reason for Leaving or Termination \_\_\_\_\_

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Period: From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_  
Name of Employer \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_  
Employer's Telephone \_\_\_\_\_  
Nature of Employer's Business \_\_\_\_\_  
Position or Positions Held \_\_\_\_\_  
Reason for Leaving or Termination \_\_\_\_\_

\* \* \*

(b) Are you now, or have you ever been engaged on your own account or with others in any occupation, business, or profession, other than law, in the State of New York or elsewhere?

If so, give in detail the nature and location thereof and the month and year of the beginning and ending of your engagement in or connection therewith. If any such business was carried on by you in partnership with others, give the names and addresses of all partners and the nature of the business. If the business was carried on by a corporation in which you held any office state its name, address, nature of the business and your connection with it.

List any action now pending against such firm or corporation and any judgment entered against it during the period of your association with it.

8. In connection with any employment, have you ever been discharged or requested to resign from or leave your position for cause?

If your answer is "Yes", give the name of each such employer and state the date and circumstances as to each such incident.

**D. BAR ADMISSIONS**

9. (a) Have you ever applied for admission to the Bar of the State of New York in this or any other Department (see CPLR § 9405), including admission pro hac vice (see Rules of Court of Appeals § 520.11)? \_\_\_\_\_.

(b) Have you ever engaged in or has your conduct ever been called into question with reference to the unauthorized practice of law? \_\_\_\_\_.

(c) Have you ever been employed by or otherwise connected with any person, firm or corporation who or which, to your knowledge, engaged in conduct that was called into question on the subject of unauthorized practice of law while you were so employed or connected? \_\_\_\_\_.

(d) Except for activities comprising part of a law school clinical program or otherwise permitted by law (see Judiciary Law §§ 478, 484, 495), have you ever tried any action or proceeding, argued any motion, drawn legal papers other than under the supervision of an attorney, given legal advice or held yourself out as an attorney in this State? \_\_\_\_\_.

If your answer is "Yes" as to any part of this question, state the matter fully. \_\_\_\_\_

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10. (a) Have you ever applied to take or taken the Bar examination in any country, state or jurisdiction other than the State of New York? \_\_\_\_\_.

(b) Have you ever applied for admission to practice as an attorney in any country, state or jurisdiction other than the State of New York? \_\_\_\_\_.

If your answer to (a) or (b) is "Yes", state specifically the disposition made of the application or the result of the Bar examination. If admitted, state the name of each jurisdiction and court by which admitted and the date of such admission. \_\_\_\_\_

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Applicants admitted in other States or countries must attach (1) an original copy of a certificate of admission and good standing at the Bar from each such jurisdiction and (2) a letter from each such jurisdiction's grievance committee, or other body entertaining complaints against lawyers, where available, certifying as to whether charges have been filed with such committee or body against you, and, if so, the substance of the charges and the disposition thereof. Certificates of good standing and grievance letters should not be dated more than 60 days prior to submission.

**E. MILITARY RECORD**

11. (a) Have you at any time or in any manner served in any of the armed forces of the United States, including reserves? \_\_\_\_\_. If the answer is "Yes", state (1) when, where, and which service; (2) period and nature of service rendered; and (3) if discharged, give date and nature of discharge. \_\_\_\_\_

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(b) Have you served in the armed forces (reserves or otherwise) of any country other than the United States of America? \_\_\_\_\_. If the answer is "Yes", give name of country, inclusive dates of service, and reason for separation from service. \_\_\_\_\_

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(c) As a member of any armed forces, have you been the subject of any charge, or have any proceedings been instituted against you, or have you been a defendant in any court martial proceeding? \_\_\_\_\_. If answer is "Yes", state the facts. \_\_\_\_\_

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#### F. CRIMINAL RECORD

12. Have you ever, either as an adult or a juvenile, been cited, arrested, taken into custody, charged with, indicted, convicted or tried for, or pleaded guilty to, the commission of any felony or misdemeanor or the violation of any law, except minor parking violations, or been the subject of any juvenile delinquency or youthful offender proceeding? **YES**\_\_\_ **NO**\_\_\_. If you answer yes, state the charge or charges, the disposition thereof and the underlying facts. Although a conviction may have been expunged from the records by an order of a court, it nevertheless should be disclosed in the answer to this question. Please note that you should have available and be prepared to submit or exhibit copies of police and court records regarding any matter you disclose in reply to this question. \_\_\_\_\_

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#### G. CIVIL MATTERS

13. State whether you have

(a) ever testified, refused to testify, or been granted immunity, as a witness in any action or proceeding, or before any prosecuting or investigative agency in any matter. \_\_\_\_\_.

(b) ever failed to answer any ticket, summons or other legal process served upon you at any time. \_\_\_\_\_. If so, was any warrant, subpoena or further process issued against you as a result of your failure to respond to such legal process? \_\_\_\_\_. State the number of unpaid traffic tickets, if any, in your name or attributable to a motor vehicle registered in your name, and the respective fines due thereon. \_\_\_\_\_.

(c) any mental or emotional condition or substance abuse problem that could adversely affect your capability to practice law? \_\_\_\_\_. Are you currently using any illegal drugs? \_\_\_\_\_.

(d) ever been charged with fraudulent conduct or any other act involving moral turpitude. \_\_\_\_\_.

(e) ever been a party to or otherwise involved in any civil or criminal action, proceeding or investigation not covered by answers to the foregoing subdivisions of this question.

\_\_\_\_\_.

If your answer is "Yes" to any subdivision of this question, indicate the subdivision and state the facts as fully as possible. If applicable, provide the name and locality of the court or agency, the approximate date of the action or proceeding, and the judgment or other disposition.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**H. CHILD SUPPORT**

14. As of the date this application for admission is filed, I AM/ I AM NOT (circle the applicable words) under an obligation to pay child support. If you circle "I AM", answer YES or NO to the following statements:

- a. I am not four months or more in arrears in the payment of child support. \_\_\_\_\_
- b. I am making payments by income execution or by court agreed payment or repayment plan or by plan agreed to by the parties. \_\_\_\_\_
- c. The child support obligation is the subject of a pending court proceeding. \_\_\_\_\_
- d. I am receiving public assistance or supplemental security income. \_\_\_\_\_

If you answer "YES" to at least one of the above four statements, you may be admitted.

If you answer "NO" to all four statements, please explain below. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**PLEASE NOTE THAT PERSONS WHO ARE FOUR MONTHS OR MORE IN ARREARS IN CHILD SUPPORT OR WHO HAVE FAILED TO COMPLY WITH A SUMMONS, SUBPOENA OR WARRANT RELATING TO A PATERNITY OR CHILD SUPPORT PROCEEDING MAY BE SUBJECT TO SUSPENSION OF THEIR BUSINESS, PROFESSIONAL, DRIVERS' AND/OR RECREATIONAL LICENSES AND PERMITS INCLUDING, BUT NOT LIMITED TO, LICENSES ISSUED PURSUANT TO ENVIRONMENTAL CONSERVATION LAW § 11-0713.**

Please further note that the intentional submission of false written statements for the purpose of frustrating or defeating the lawful enforcement of support obligations is punishable pursuant to section 175.35 of the Penal Law of the State of New York.

**I. FINANCIAL MATTERS / DEFAULTS**

15. (a) Are there any unsatisfied judgments against you? \_\_\_\_\_. If so, list the same giving name and address of judgment creditor and the court by which judgment was rendered, together with the date and amount thereof and the nature of the claim on which it was based. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(b) Are you in default in the performance or discharge of any duty or obligation imposed upon you by a judgment, decree, order or directive of any court or governmental agency? \_\_\_\_\_. If so, state the facts. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(c) Do you owe any debt for \$300.00 or more, which is past due for over 90 days? \_\_\_\_\_. If so, list each such debt and state the name and address of the creditor, the amount presently owed, the due date, and the nature of the debt. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(d) Have you ever applied for or been granted a discharge in bankruptcy? \_\_\_\_\_. If so, state the facts. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(e) Do you have any loan made or guaranteed by the New York State Higher Education Services Corporation currently outstanding? \_\_\_\_\_. If so, state whether you are presently in default on any such loan and, if you are presently in default, state the name and address of the creditor, the amount presently owed, the due date, and the nature of the default.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**J. LICENSES / BONDS**

16. (a) Have you ever applied for a license the procurement of which required proof of good character (other than Bar applications listed under question number 10 above)? \_\_\_\_\_. If granted, state, as to each such license, the approximate date it was granted and the name of the authority granting it. \_\_\_\_\_

\_\_\_\_\_.

\_\_\_\_\_.

(b) If your application for such a license was not granted, state the facts. \_\_\_\_\_

\_\_\_\_\_.

\_\_\_\_\_.

(c) If any such license was revoked, state the facts. \_\_\_\_\_

\_\_\_\_\_.

\_\_\_\_\_.

17. Has anyone ever sought to recover on or cancel a fidelity bond on account of your conduct in connection with a bonded position held by you? \_\_\_\_\_. If so, specify the nature of your position, the dates during which you were bonded, and the underlying circumstances. \_\_\_\_\_

\_\_\_\_\_.

\_\_\_\_\_.

**K. LOYALTY / OATHS /CODE OF PROFESSIONAL RESPONSIBILITY**

18. Have you ever organized or helped to organize or become a member of any organization or group of persons which, during the period of your membership or association, you knew was advocating or teaching that the government of the United States or any state or any political subdivision thereof should be overthrown or overturned by force, violence or any unlawful means? \_\_\_\_\_. If your answer is in the affirmative, state the facts below. \_\_\_\_\_

\_\_\_\_\_.

\_\_\_\_\_.

19. Is there any reason why you cannot take and subscribe to an oath or affirmation that you will support the Constitutions of the United States and of the State of New York? \_\_\_\_\_. If there is, please explain. \_\_\_\_\_

\_\_\_\_\_.

\_\_\_\_\_.

20. Can you conscientiously, and do you, affirm that you are without any mental reservation, loyal to and ready to support the Constitution of the United States? \_\_\_\_\_.

21. (a) Have you read the Disciplinary Rules of the Code of Professional Responsibility adopted by the Appellate Division (see, 22 NYCRR Part 1200)? \_\_\_\_\_.

(b) Will you conscientiously endeavor to conform your professional conduct to them? \_\_\_\_\_.

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**Since this is a continuing application, I will submit such additional affidavits, papers or information as may be requested or as may be necessitated by any change in my situation up to the date of my appearance before the Appellate Division to be sworn in as an attorney and counselor-at-law.**

STATE (COUNTRY) OF \_\_\_\_\_ )  
\_\_\_\_\_)ss.:  
COUNTY (CITY) OF \_\_\_\_\_ )

I, \_\_\_\_\_, being duly sworn, say: I have read the foregoing questions and have fully, truthfully and accurately answered the same. The foregoing answers are true of my own knowledge, except if stated to be made upon information and belief, and as to such answers, I believe them to be true.

Signature of applicant \_\_\_\_\_

Dated \_\_\_\_\_

Subscribed and sworn to or affirmed before me this  
day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
(Affix seal or stamp.)

(If application questionnaire is sworn to outside the United States, its commonwealths, territories, or possessions, attach certificate of attesting officer's authority.)

\* \* \*

**ADDENDUM: DESIGNATION OF AGENT**

This designation should be completed only by applicants who do not reside and are not employed full time in the State of New York (see, 22 NYCRR 520.13).

I, \_\_\_\_\_, do hereby appoint the Clerk of the Appellate Division, \_\_\_\_\_ Judicial Department<sup>2</sup>, as my agent upon whom process may be served with like effect as if served upon me personally, in any action or proceeding hereafter brought against me and arising out of or based upon any legal services rendered or offered to be rendered by the undersigned in the State of New York.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

STATE (COUNTRY) OF \_\_\_\_\_ )  
\_\_\_\_\_ )ss:  
COUNTY(CITY) OF \_\_\_\_\_ )

On the \_\_\_\_ day of \_\_\_\_\_ in the year 20\_\_ before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the above designation of agent and acknowledged to me that he or she executed the same, and that by his or her signature on the designation of agent he or she executed the designation of agent.

\_\_\_\_\_  
Officer qualified to administer oath  
(Notary Public)  
(Affix seal or stamp)

Revised 10/02

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<sup>2</sup> List the Appellate Division Department in which you are being admitted.

**APPLICATION FOR ADMISSION TO PRACTICE  
AS AN ATTORNEY AND COUNSELOR-AT-LAW IN THE  
STATE OF NEW YORK**

**FORM AFFIDAVIT AS  
TO APPLICANT'S GOOD MORAL  
CHARACTER**

NEW YORK STATE SUPREME COURT  
APPELLATE DIVISION

In the Matter of the Application of

\_\_\_\_\_ )  
(name of applicant)

for Admission to Practice as an  
Attorney and Counselor-at-Law.

**INSTRUCTIONS**

Applicant must submit two (2) good moral character affidavits as part of an application for admission (see 22 NYCRR 520.12). The affidavits should be completed by reputable persons who have known applicant for not less than two years. The affidavits should not be completed by persons who also complete employment affidavits on applicant's behalf. The affidavits should not be completed by persons associated with applicant's present employer or persons related to applicant by blood or marriage or by other applicants or by members of the faculty or administrative staff of any law school attended by applicant. Preferably, one affidavit should be completed by an attorney in good standing. The person completing the affidavit should return it to the applicant who should file it with and at the same time as his or her application for admission questionnaire.

STATE (COUNTRY) OF \_\_\_\_\_ )  
\_\_\_\_\_ )SS.:  
COUNTY (CITY) OF \_\_\_\_\_ )

I, \_\_\_\_\_ (name of affiant), being duly sworn, depose and say that the answers to the following questions have been written by or under my direction; that the substance and the language have been supplied by me and not by applicant or any other person; and that both the questions and the answers have been carefully read by me, and that the several answers are true to my own knowledge, except those stated to have been made on information and belief, or which express my opinion, and as to those answers, I believe them to be true.

1. My home and office addresses (full mailing addresses) are as follows:

Home address \_\_\_\_\_

City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Office address \_\_\_\_\_

City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail address (optional) \_\_\_\_\_

2. This question to be completed only by affiants who are attorneys. I am currently admitted to practice and in good standing in the following jurisdiction(s) and was so admitted on the following dates:

Jurisdiction \_\_\_\_\_ Year of Admission \_\_\_\_\_  
Jurisdiction \_\_\_\_\_ Year of Admission \_\_\_\_\_

3. In answer to this question, affiants should provide the following: (1) the length and nature of affiant's acquaintance with applicant; (2) affiant's opinion as to applicant's good moral character and general fitness to practice law; (3) the basis for affiant's opinion; (4) any other information or facts which affiant believes would be helpful in evaluating applicant's character and fitness to practice law; and (5) whether affiant recommends applicant for admission to the New York State Bar. \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Signature of affiant)

\_\_\_\_\_  
(Date)

Subscribed and sworn to or affirmed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public  
(Affix seal or stamp.)

(If affidavit is sworn to outside the United States, its commonwealths, territories, or possessions, attach certificate of attesting officer's authority.)

(If this affidavit is not in English, it must be accompanied by a duly authenticated English translation.)

**APPLICATION FOR ADMISSION TO PRACTICE  
AS AN ATTORNEY AND COUNSELOR-AT-LAW IN THE  
STATE OF NEW YORK**

**FORM AFFIDAVIT AS  
TO APPLICANT'S LAW-RELATED  
EMPLOYMENT AND/OR SOLO PRACTICE**

NEW YORK STATE SUPREME COURT  
APPELLATE DIVISION

In the Matter of the Application of

\_\_\_\_\_  
(name of applicant)

for Admission to Practice as an  
Attorney and Counselor-at-Law.

**INSTRUCTIONS**

For each law-related employment or period of solo law practice listed by applicant on the application for admission questionnaire (see question number 7), applicant must submit this form affidavit. For a period of solo practice, this affidavit must be completed by an attorney. Unless otherwise not feasible, this affidavit should not be completed by persons related to applicant by blood or marriage. The person completing this form affidavit should return it to the applicant who should submit it with and at the same time as his or her application for admission questionnaire.

\* \* \*

STATE (COUNTRY) OF \_\_\_\_\_ )  
\_\_\_\_\_ ) SS.:  
COUNTY (CITY) OF \_\_\_\_\_ )

I, \_\_\_\_\_ (name of affiant), being duly sworn, depose and say that the answers to the following questions have been written by or under my direction; that the substance and the language have been supplied by me and not by applicant or any other person; and that both the questions and the answers have been carefully read by me, and that the several answers are true to my own knowledge, except those stated to have been made on information and belief, or which express my opinion, and as to those answers, I believe them to be true.

1. My home and office addresses (full mailing addresses) are as follows:

Home address \_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_

Office address \_\_\_\_\_

City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Office e-mail address (if any) \_\_\_\_\_

2. This question to be completed only by affiants who are attorneys. I am currently admitted to practice and in good standing in the following jurisdiction(s) and was so admitted on the following dates:

Jurisdiction \_\_\_\_\_ Year of Admission \_\_\_\_\_

Jurisdiction \_\_\_\_\_ Year of Admission \_\_\_\_\_

Jurisdiction \_\_\_\_\_ Year of Admission \_\_\_\_\_

3. This question to be completed only by attorneys confirming a period of solo practice of law by applicant.

(a) The length and nature of my acquaintance with the applicant is as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(b) Applicant engaged in the solo practice of law at the following address(es) during the following period(s) of time:

Address \_\_\_\_\_

City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_

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

Address \_\_\_\_\_

City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_

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

4. This question to be completed by affiants confirming a law-related employment by applicant (not solo practice).

(a) Applicant was employed by me individually in a law-related capacity or was employed in a law-related capacity as follows:

(1) Name and address of employer:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_

(2) Beginning and ending dates of employment (or that it continues to date) (if terminated, affiant should state how and why): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(3) Position and nature and extent of legal services performed by applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(b) My relationship with the employer and applicant during the period of employment was as follows:

(1) My position with employer (for example, member of employing firm, head of law department of a corporation, managing attorney, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(2) Nature and frequency of my contacts with and/or supervision, if any, of applicant (if affiant did not supervise applicant, affiant should provide name and position of supervisor): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(c) Applicant's duties were satisfactorily performed: YES \_\_\_ or NO \_\_\_; if not, applicant's performance was not satisfactory in the following respects \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

5. I hereby provide any other facts within my knowledge, or of which I have information, which in

my opinion have any bearing on applicant's qualifications and moral character or fitness to practice law, or which would be helpful to the Appellate Division or its Committees on Character and Fitness in determining applicant's character and fitness . \_\_\_\_\_

\_\_\_\_\_  
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\_\_\_\_\_.

\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Date

Subscribed and sworn to or affirmed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public  
(Affix seal or stamp.)

(If affidavit is sworn to outside the United States, its commonwealths, territories, or possessions, attach certificate of attesting officer's authority.)

(If this affidavit is not in English, it must be accompanied by a duly authenticated English translation.)

**APPLICATION FOR ADMISSION TO PRACTICE  
AS AN ATTORNEY AND COUNSELOR-AT-LAW IN THE  
STATE OF NEW YORK**

**FORM LAW SCHOOL CERTIFICATE**

**INSTRUCTIONS**

Applicant must complete the first portion of this form certificate and send the form to each law school listed by the applicant on his or her application for admission questionnaire (see question number 5).

The law school should complete the remainder of the form and return it directly to the Appellate Division Department designated below by the applicant.

Completion and submission of this form is a prerequisite to applicant's admission to the New York State Bar.

**TO BE COMPLETED BY APPLICANT:**

Name of applicant: \_\_\_\_\_

Applicant's current address (office or home) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail (if any) \_\_\_\_\_

Social security number: \_\_\_\_\_

Name of law school: \_\_\_\_\_

Address of law school: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Dates of attendance at law school: \_\_\_\_\_

Date graduated from law school: \_\_\_\_\_

Degree conferred by law school: \_\_\_\_\_

AUTHORIZATION BY APPLICANT: I, \_\_\_\_\_, hereby authorize \_\_\_\_\_ (name of law school) and persons issuing this certificate to release to the Appellate Division of New York State all information, files or records requested by it or its Committees on Character and Fitness in connection with the processing of my application for admission to the Bar of the State of New York.

Dated: \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Signature of Applicant)

DESIGNATION OF APPELLATE DIVISION DEPARTMENT TO WHICH LAW SCHOOL SHOULD MAIL COMPLETED FORM (applicant must check one of the following):

\_\_\_ FIRST JUDICIAL DEPARTMENT: Committee on Character and Fitness, Appellate Division, First Department, 41 Madison Avenue, 26<sup>th</sup> Floor, New York, New York 10010.

\_\_\_ SECOND JUDICIAL DEPARTMENT: Executive Secretary, Committees on Character and Fitness, Appellate Division, Second Department, 335 Adams Street, Room 2404, Brooklyn, New York 11201.

\_\_\_ THIRD JUDICIAL DEPARTMENT: Admissions Office, Appellate Division, Third Department, P.O. Box 7350, Capitol Station, Albany, New York 12224.

\_\_\_ FOURTH JUDICIAL DEPARTMENT: Admissions Office, Appellate Division, Fourth Department, Suite 200, 50 East Avenue, Rochester, New York 14604.

TO BE COMPLETED BY LAW SCHOOL:

Please confirm whether or not the law school information provided by applicant above is accurate: \_\_\_ YES \_\_\_ NO. If NO, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

Was applicant charged with any misconduct, or disciplined, suspended, or dropped for any misconduct? \_\_\_ YES \_\_\_ NO. If so, please state fully: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

Is there any other discreditable information in the personnel or other records of the law school regarding the applicant's conduct or activities or bearing upon applicant's character not otherwise set forth in this form certificate? \_\_\_ YES \_\_\_ NO. If so, please state fully: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

If applicant filed a questionnaire or written application containing data about himself or herself, please supply a copy thereof, if available.

Dated \_\_\_\_\_, 20\_\_.

Official Seal of  
Law School:

\_\_\_\_\_  
Official Signature

\_\_\_\_\_  
Title

(If form is not in English, it must be accompanied by a duly authenticated English translation.)