

In The Supreme Court of the State of Oregon

In The Matter Of The Application Of _____)

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BR 8.1 Reinstatement

For Reinstatement As An Active _____)

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Member Of The Oregon State Bar _____)

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Application

I hereby apply for reinstatement as an active member of the Oregon State Bar and provide the following information in compliance with the Rules of Procedure of the Oregon State Bar. I understand that the following answers and statements are submitted under oath and that failure to answer any item or to fully disclose any fact or information called for in this application may result in the denial of my application for reinstatement and/or in disciplinary action.

I understand that I can request a reasonable accommodation under the Americans with Disabilities Act by contacting the Oregon State Bar Regulatory Services at regsvcs@osbar.org or (503) 431-6343. More information about the ADA is available at <https://www.osbar.org/ada/adanotice.html>.

Personal History

1. Full Name: _____ Bar # _____

2. Other names or surnames by which you have been known: _____

3. Current addresses and telephone numbers:

Email Address: _____

Residence Address: _____ Phone: _____

Business Address: _____ Phone: _____

4. List former addresses at which you have resided from the date you ceased to be an active member of the Oregon State Bar. Attach additional sheet if necessary. (Indicate dates resided):

5. Date and Place of Birth: _____

6. Date that you ceased to be an active member of the Oregon State Bar and the reason(s) for the change in your membership status:

Date: _____

Reason(s): _____

● = attachment necessary

○ = attachment may be necessary

Personal History

7. Since you last applied for admission to the Oregon State Bar:
- a. have you been charged with, arrested for or convicted of a violation of any federal, state, municipal or other law, statute or ordinance (excluding minor traffic violations)? Yes No

 - b. have you been accused of or charged with fraud or dishonesty in any proceeding, or in connection with employment, or relating to actions taken while serving in a fiduciary capacity? Yes No

 - c. have you been a party to, or been named or described in any civil action, suit or proceeding, including bankruptcy or mental competency proceeding? Yes No

 - d. have you been denied any license or certificate that requires proof of good moral character? Yes No

 - e. have you been charged with contempt of court? Yes No

 - f. have you had a dependency upon, undergone treatment for, or been discharged from employment due to the use of a controlled substance or alcohol? Yes No
-

If you answered "yes" to any part of item 7, attach an explanation of the circumstances. If applicable, provide dates, parties, court, proceeding, facts and disposition, and the name and address of the person or body possessing the record of any proceeding or information regarding the described circumstances.

8. The Oregon State Bar (Bar) makes inquiries about circumstances that may affect an applicant's ability to meet the professional responsibilities of a lawyer. The purpose of such inquiries is to determine the current fitness of an applicant to practice law. The mere fact of treatment, monitoring, or participation in a support group is not, in itself, a basis on which reinstatement is denied. The Oregon State Bar routinely considers reinstatement for individuals who demonstrate personal responsibility and maturity and in dealing with fitness issues. The Oregon State Bar encourages applicants who may benefit from assistance to seek it.

The Bar may, on occasion, recommend denial for applicants whose ability to function is impaired in a manner relevant to the practice of law at the time that the reinstatement decision is made, or to applicants who demonstrate a lack of candor by their responses. This is consistent with the public purpose that underlies the licensing responsibilities assigned to the Bar. Furthermore, the burden for demonstrating character and fitness to practice law is placed upon the applicant.

The Bar does not seek information that is reasonably characterized as situational counseling. Examples of situational counseling include stress counseling, domestic counseling, and grief counseling. The Bar does not seek medical records as part of this initial application. If medical records are required to assist in any reinstatement decisions, they will be requested at a later point in time. It is not necessary to include information related to a request for ADA accommodations unless it is also relevant to an affirmative response to one of the questions in this Section 8.

If you answer "YES" to any of the following questions, please attach a separate sheet of paper with a detailed explanation of the underlying circumstances, consequences, and resolution. Information we receive in the course of a reinstatement proceeding is subject to disclosure under the Oregon Public Records Law, ORS Chapter 192. Lack of candor in your responses may provide a basis for denial of reinstatement to the bar.

● = attachment necessary

○ = attachment may be necessary

○ 8. (continued)

- a. Within the past ten years, or since you were last an active member of the Oregon State Bar, whichever is longer, have you had any instances, or exhibited any conduct or behavior, that could call into question your ability or capacity to satisfy any of the following criteria, with or without reasonable accommodations: Yes No
- i. to undertake fundamental lawyering skills such as problem solving, legal research, analysis and reasoning, factual investigation, organization and management of legal work, making appropriate reasoned legal judgments, and recognizing and resolving ethical dilemmas.
 - ii. to communicate legal judgments and legal information to clients, other attorneys, judicial and regulatory authorities.
 - iii. to perform legal tasks in a timely manner.
 - iv. to be aware of, control, and appropriately express one's emotions in a professional setting.
 - v. to maintain respectful professional relationships.

b. Have you been subject to any discipline or remediation for unprofessional, or disruptive or erratic behavior? Yes No

c. Are you currently subject to a petition for guardianship, conservatorship, or civil commitment, or have you been subject to a guardianship, conservatorship, or civil commitment within the past five years that may affect your current ability to practice law in a competent, ethical, and professional manner? ("Ethical manner" means compliance with the Oregon Rules of Professional Conduct.)? Yes No

d. Has any employer, profession, school, club or organization found you in violation of its Code of Conduct? Yes No

e. Within the past ten years, or since you were last an active member of the Oregon State Bar, whichever is longer, have you used alcohol or drugs to such an extent that it could impair your current ability to practice law in an ethical manner? Do not answer this question in the affirmative if you have successfully completed, or are receiving, treatment for alcohol or drug use and do not currently use alcohol or drugs to such an extent that it could impair your current ability to practice law in an ethical manner. ("Ethical manner" means compliance with the Oregon Rules of Professional Conduct.) Yes No

f. Within the past ten years, or since you were last an active member of the Oregon State Bar, whichever is longer, have you used any drug that is currently illegal under Oregon state law and that was illegal to use under the laws of the jurisdiction in which you used the drug? Yes No

○ 9. Do you presently have any unsatisfied judgments, decrees or tax liens against you? Yes No
If so, attach a statement describing the nature and date of such judgments, decrees or liens, including the amount owing, the names and addresses of the creditors and the jurisdictions in which the debts arose.

○ 10. Have you filed timely your federal and state income tax returns for each of the three years preceding the current year? Yes No
If not, explain on an attached sheet, Note: you may be required to provide copies of your tax returns upon the request of Disciplinary Counsel.

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Employment History

- 11. Attach a list of your occupations or employment since you were last an active member of the Oregon State Bar. Include the following:
- the name and address of each employer;
 - the nature of the business and your position;
 - the nature and extent of your law practice if you practiced in another jurisdiction;
 - the period of your employment;
 - the reason for termination of your employment.

This list should account for the entire period since you last were an active member of the Oregon State Bar. Indicate periods of unemployment, service in the armed forces, enrollment in school or other activities where appropriate.

- 12. Has anyone ever complained to any lawyer licensing authority or bar association (other than the Oregon State Bar), court or administrative officer about your professional services or conduct? Yes No
- If so, describe the facts, parties, court, case number, dates and disposition on an attached sheet.*
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- 13. Have you ever been a party to a suit for legal malpractice? Yes No
- If so, describe the facts, parties, court, case number, dates and disposition on an attached sheet.*
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- 14. During the period you were not an active member of the Oregon State Bar, did you engage in the practice of law in Oregon, or in any jurisdiction where you were not authorized by law to do so? Yes No
- If so, explain on an attached sheet.*
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- 15. Have you ever had a lawyer trust account check dishonored because of insufficient funds? Yes No
- If so, explain on an attached sheet.*
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- 16. Have you ever held judicial office? Yes No
- If so, describe the office, the period and location of your tenure, and the reason for termination of office on an attached sheet.*
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- 17. Have you ever been bonded? Yes No
- If so, has anyone sought to recover on the bond? Yes No
- If so, describe on an attached sheet the nature of the claim, the circumstances of your employment in the bonded position, the name of the bonding company, the amount of the bond and the disposition of the claim.*
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- 18. Have you ever been denied a bond? Yes No
- If so, describe the facts on an attached sheet.*
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Bar History

19. Date of admission to the Oregon State Bar: _____

20. Have you ever applied for admission to practice law in any other jurisdiction? Yes No

If so, provide on an attached sheet the name of the jurisdiction, the date of the application, the disposition thereon and the present status of your membership. If you currently are not in good standing in a jurisdiction where you were once admitted, specify the reasons for and date of your change in membership status in each instance.

- 21. Provide a certificate of good standing from the bar association or highest court in each jurisdiction other than Oregon where you are admitted to practice law.
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22. Have you ever been admonished, censured, reprimanded, suspended, disbarred or otherwise disciplined as a member of the legal profession in any jurisdiction? Yes No

If so, attach a description of the proceedings, including the date of sanction and the reason(s) therefor. If the proceeding took place outside of Oregon, provide copies of the findings, conclusions and disposition issued by the fact-finding body, the opinion of each appellate court or the findings, conclusions and recommendations of each investigatory body that acted upon the allegations against you.

23. Attach a copy of each petition or application for reinstatement (except this application) filed by you or on your behalf in any jurisdiction and of each finding, decision or order made or entered in connection therewith.
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References

24. Provide the names of five persons, each of whom is able and hereby authorized to provide a factual, accurate and reliable appraisal of your character. These persons should not be related to you by blood or marriage and the acquaintances should be more than casual and of a substantial duration. Three of these references must be members of the Oregon State Bar unless, because of prior residence, you are unable to meet this requirement. In that instance, three of these references must be members in good standing of another state bar or jurisdiction.

a. Name: _____ Occupation: _____

Nature and Length of Acquaintance _____

Mailing Address: _____

Phone: _____ Email: _____

b. Name: _____ Occupation: _____

Nature and Length of Acquaintance _____

Mailing Address: _____

Phone: _____ Email: _____

c. Name: _____ Occupation: _____

Nature and Length of Acquaintance _____

Mailing Address: _____

Phone: _____ Email: _____

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References *(continued)*

d. Name: _____ Occupation: _____

Nature and Length of Acquaintance _____

Mailing Address: _____

Phone: _____ Email: _____

e. Name: _____ Occupation: _____

Nature and Length of Acquaintance _____

Mailing Address: _____

Phone: _____ Email: _____

Additional Information

25. Do you intend to engage in the practice of law or be employed in a law-related position upon reinstatement? Yes No
If yes, explain where and in what capacity.

- 26 Provide the following materials as separate attachments with your application for reinstatement:
 1. Your Social Security Number for a background check.
 2. A complete Drivers and Motor Vehicles Record from your State.
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I HEREBY DECLARE THAT THE ABOVE STATEMENT IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND THAT I UNDERSTAND IT IS MADE FOR USE AS EVIDENCE IN COURT AND IS SUBJECT TO PENALTY FOR PERJURY.

Signature _____ Date _____

PLEASE RETURN TO:

Oregon State Bar
Regulatory Services
P.O. Box 231935
Tigard, OR 97281-1935

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