

BEFORE THE BOARD OF GOVERNORS OF THE OREGON STATE BAR

In The Matter Of The Request Of)
)
)
)
)
To Be An Active)
Member Of The Oregon State Bar)
)

Request for Active Membership

I hereby request to become 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 document may result in the denial of my request for active membership and/or in disciplinary action.

PERSONAL HISTORY	
1 Full Name:	Bar #:
2 Other names or surnames by which you have been known:	
3 Current addresses and telephone numbers:	
Residence Address:	Phone:
Business Address:	Phone:
<input type="radio"/> 4 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):	
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: _____	

PERSONAL HISTORY *(continuing)*

7 Since you were last an active member of the OSB:

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 a Do you currently have any condition or impairment (including, but not limited to, substance abuse, alcohol abuse, or a mental, emotional or nervous disorder or condition) that in any way affects, or if untreated could affect, your ability to practice law in a competent and professional manner? Yes No

b If so, are the limitations caused by your condition or impairment reduced or ameliorated because you receive ongoing treatment or because you participate in a monitoring program? Yes No

If you answered yes to item 8(a), attach an explanation of the condition or impairment, along with a description of any treatment you receive or program in which you participate.

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.

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.

- 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.

- 14 During the period you were not an active member of the Oregon State Bar, did you engage in the practice of law in any jurisdiction where you were not authorized by law to do so?

Yes No

If so, explain on an attached sheet.

- 15 Have you ever had a client trust account check dishonored because of insufficient funds?

Yes No

If so, explain on an attached sheet.

- 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.

- 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.

- 18 Have you ever been denied a bond?

Yes No

If so, describe the facts on an attached sheet.

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 admitted to practice 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.

- 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.

- 24** Describe continuing legal education credits you have obtained, in any jurisdiction, since you last were an active member of the Oregon State Bar. Attach a copy of any MCLE compliance report you have filed in any jurisdiction during this period.

REFERENCES

25 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
Mailing Address/Phone #	Nature and Length of Acquaintance
b. Name	Occupation
Mailing Address/Phone #	Nature and Length of Acquaintance
c. Name	Occupation
Mailing Address/Phone #	Nature and Length of Acquaintance

d. Name _____ Mailing Address/Phone # _____	Occupation _____ Nature and Length of Acquaintance _____
e. Name _____ Mailing Address/Phone # _____	Occupation _____ Nature and Length of Acquaintance _____
26 Do you intend to engage in the practice of law or be employed in a law-related position upon reinstatement? <i>If yes, explain where and in what capacity.</i>	
27 Provide the following materials: <ul style="list-style-type: none"> ✓ A completed fingerprint card (provide all information requested on the card); ✓ An executed release and authorization to obtain your motor vehicle driving record. <i>The required forms have been supplied with your application packet.</i>	
MEMBER'S SIGNATURE	
Signature _____	Date _____

AFFIDAVIT

State of _____)
) ss.
County of _____)

I, the undersigned, being first duly sworn, state that: I am the person who signed the foregoing request for active membership; I realize that whether I become an active member of the Oregon State Bar may depend largely upon the truth, falsity or completeness of my answers in this document; I will give any further information that may be required concerning my past record but, to my knowledge, the answers that I have provided in this document are true and complete; I hereby authorize the Supreme Court of the State of Oregon and the Oregon State Bar, or any agent or authorized representative thereof, to make a complete investigation of my character, financial responsibility and general fitness to practice law in Oregon and of the completeness of my answers provided in this document; and I hereby release and exonerate those so authorized, and any person or organization supplying requested information, from liability of any kind resulting from investigating or providing the information.

Applicant

Subscribed and sworn to before me this _____ day of _____, 20_____.

Notary Public for _____

My Commission Expires: _____