

**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, 26th 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.)