

SUMMARY STATEMENT/CHECKLIST

NAME: _____ PHONE: _____
(As it appears on letter from State Board of Law Examiners)

ADDRESS: _____

E-MAIL ADDRESS: _____

Affirmations of Good Moral Character (two required):

1. _____ 2. _____

Legal Employment Affirmations (list names of all legal employers):

Business Employment Letter (only if no substantial legal employment) on letterhead of current or last employer.

Law School Certificates:

Other Jurisdictions where admitted (certificates and grievance letters attached)

Pro Bono Compliance Affidavit(s)

Skills Competency Affidavit

State Board of Law Examiner's Certification (mail when you receive)

Change of name (Order, marriage certificate, divorce decree)

Military discharge

DO NOT WRITE BELOW THIS LINE

Request Letter Sent _____

Reviewed by _____

OCA Registration Fee Received _____

PLEASE RETURN THIS COMPLETED CHECKLIST WITH YOUR APPLICATION