

United States Tourt of Appeals for the Armed Forces

Washington, D. T.

Application for Admission to Practice

Personal Information

1.	Full Name:	your name as you want it shown	on your partificato)	_				
2.	Male or Female:	your name as you want it shown	3.	Date of I	Birth:			
4.		cable): Rank:						
5.	Residence Address:							
		Street Address				Ар	artment/	Unit #
		City			State	ZIF	P Code	
6.	Office Address:							
		Street Address				Ара	artment/l	Unit #
		City			State	ZIF	^o Code	
7.	Home Phone: ()	Work Phone:	()			
8.	E-mail Address:							
9.	Certificate Mailing Address: Residence Office							
10.	Federal and State Courts to which you are admitted to practice law:							
11.	Place where you are engaged in the practice of law:							
12.	Have you ever change	ed your name or been knowr	ا by any name or s	urname				
	other than the name a	ppearing on this application	?		Yes		No	
	If so, state the name(s) and provide information in	detail:					
13.	Have you ever been disciplined, disbarred, sanctioned, or suspended from practice before any court, department, bureau, or commission of the United							
		e, Commonwealth, Territory,						
	Columbia, or have you	ever received any public or	private reprimands				No	
	Such entity pertaining	to your conduct as a membe	i oi the bar?		Yes		No	
	g							
		and attach a separate staten	nent.					
14.	If so, explain in detail a	and attach a separate staten ary proceedings pending ag			Yes		No	
14. 15.	If so, explain in detail a Are there any disciplin		ainst you?	n)?	Yes Yes		No No	

Agreement and Certification

I agree to inform the Court within 10 days of any disciplinary action taken against me by any entity described in question 13.

I certify that I have read the foregoing information and have answered them fully and frankly. The answers are complete and true to my own knowledge.

Signa	nature of Applicant Dat	te					
Oath or Affirmation of Attorneys							
	I will take the oath or affirmation in person. (Contact the Admissions Clerk at 202-761-7364 to arrange the admission in open session of the court.)						
	I will not appear in person, but I declare as follows:						
I do solemnly (swear)(affirm) that I will support the Constitution of the United States, and that I will conduct myself as an attorney and counselor of this Court, uprightly and according to law, so help me God.							
Signa	nature of Applicant Dat	te					
USC/	CAAF Bar No. (Clerk's Use Only)						
NOTE: Applicant must submit with this completed form a check for \$50 payable to Clerk of the Court, U.S. Court of Appendix for the Armod Forces, together with an OPICINAL SIGNED partificate from the preciding judge, alork, or							

Appeals for the Armed Forces, together with an <u>ORIGINAL SIGNED</u> certificate from the presiding judge, clerk, or other appropriate officier of the court listed in question 10, or from any other appropriate official from the Bar of such court, that the applicant is currently a member of the Bar in good standing. The certificate must be dated within one year of the date of this application. See Rule 13 of the Court's Rules of Practice of Procedure.

The mailing address for the submission of application is: Clerk of the 450 E Stree

Clerk of the Court, USCAAF 450 E Street, NW Washington, D.C. 20442-0001