



United States Court of Appeals for the Armed Forces

Washington, D.C.

Application for Admission to Practice

Personal Information

1. Full Name: _____
(Please type your name as you want it shown on your certificate.)
2. Male or Female: _____ 3. Date of Birth: _____
4. Military Service (if applicable): _____ Rank: _____
5. Residence Address: _____
Street Address Apartment/Unit #
City State ZIP Code
6. Office Address: _____
Street Address Apartment/Unit #
City State ZIP 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 changed your name or been known by any name or surname other than the name appearing 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 States, or of any State, Commonwealth, Territory, Possession, or the District of Columbia, or have you ever received any public or private reprimands from any such entity pertaining to your conduct as a member of the bar? Yes ☐ No ☐
If so, explain in detail and attach a separate statement.
14. Are there any disciplinary proceedings pending against you? Yes ☐ No ☐
15. Have you ever been convicted of a crime (other than a traffic violation)? Yes ☐ No ☐
If so, explain in detail and attach a separate statement.

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.

Signature of Applicant

Date

Oath or Affirmation of Attorneys

☐ I will take the oath or affirmation in person. *(Contact the Admissions Clerk at 202-761-7366 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.

Signature of Applicant

Date

USCAAF Bar No. _____ (Clerk's Use Only)

Note 1: The fee for the Bar application is now \$55, and you can pay using a credit card, check, or money order. Along with the payment or payment receipt, the applicant must send this completed form, and an ORIGINAL SIGNED certificate of good standing from the court mentioned in question 10. The certificate of good standing must be dated within ninety days of the application date.

Note 2: To pay by credit card, go to <https://link.clover.com/urlshortener/YQMbZC> for access to the Payment Portal. If you choose to pay by credit card, make sure to include the credit card receipt with your Bar application package.

Note 3: To pay by check or money order, checks/money order is made payable to the Clerk of the Court, U.S. Court of Appeals for the Armed Forces (USCAAF). A \$25 processing fee will be charged for returned checks or insufficient funds (NSF).

Note 4: Group Applications: When sending in group applications for an in-court admissions ceremony, a point of contact (POC) must be given to USCAAF for processing and coordination. The POC is responsible for making sure that all necessary documents and payment methods are included with the group package. To effectively review and process applications, packages should arrive at least 2 weeks before the requested swearing-in date. Mail is checked off-site before it reaches USCAAF, which can cause delays of up to 2 weeks or more.

The mailing address for the submission of application is:

Clerk of the Court

U.S. Court of Appeals for the Armed Forces

450 E Street, NW

Washington, D.C. 20442-001