APPLICATION FOR ADMISSION TO THE PRACTICE AS AN ATTORNEY OR TRIAL ASSISTANT IN THE REPUBLIC OF THE MARSHALL ISLANDS

Application Fee: Attorneys – \$250.00 Trial Assistants – \$100.00

or	e space is requ	ired for a response	to a question, attach extra sheets	of paper as necessar		
	Full Name of	Applicant				
	List all other names or surnames you have used or been known by and describe when, how and why your name was changed.					
	Name	Dates Used	Description of Change			
	Date of Birth		Age	Sex		
			Place of Birth			
	Social Security Number					
	List any other social security number(s) you have used					
	Reason					
	Permanent He	ome Address				
	Contact telep	hone number, fax r	number, and email address			

	degree received, if any.					
	Name of Law School Location	Date	s Attended	Degree		
8.	List the names and locations of all attended and the degree received, it	_	and universities you	attended, the dates		
	Name of College/university	Location	Dates Attended	Degree		
9.	List the names and locations of all high schools you attended, the dates attended and whether you graduated.					
	Name of High School Location	Dates Attend	ded Graduated	(Yes/No)		
10						
10.	Specialization in law (if any)(e.g.,	criminal, corpo	orate, real estate, fam	ily, tort)		
11.a.	Intent to practice as government attorney or trial assistant	, private no	on-profit, or p	rivate for profit		
11.b.	If government practice, state title _					
12.	Representation will involve mostly civil, or legal drafting and ac			, both criminal and		
13.a.	Have you ever been refused admiss	sion to practice	in any jurisdiction?			
	Yes No					

13.b.	If yes	, where date
	Reaso	on
14.a.		you resigned in lieu of discipline, been reprimanded, censured, suspended, rred, or otherwise disciplined from practicing law before any court or administrative sy?
	Yes_	No
14.b.	If yes	, explain the type of action, jurisdiction, date and details of the action.
15.a.	again	here now or have there ever been any charges or complaints (formal or informal) st you or investigations commenced concerning your conduct as an attorney or trial ant? Include charges or complaints that did not result in discipline.
15.b.	If yes outco	, explain the type of complaint, investigation or action, jurisdiction, date, details and me of the action.
16.	Empl	oyment experience in the preceding four years.
		every job you have held in the last four years, the name and addresses of your oyer, and the dates of employment.
	A.	Position or job description
		Employer dates
		Address of employer
	B.	Position or job description
		Employer dates
		Address of employer

	C.	Position or	job description _				
		Employer	_		dates		
		Address of	employer				
17.a.		ng the last ter employment?	ı years, have you t	oeen suspended,	discharged, or asked to resign from		
	Yes_	No					
17.b.	•	s, explain the employer.	action, the reason	s for the action,	the dates, and the name and address		
18.a.	cauti		nployer as a result	•	emoted, disciplined, terminated or disconsumption of alcohol, prescription		
	Yes_	No					
18.b.	action				action was taken, the dates of such on, the background and the resolution		
19.a.	Do yo	ou currently oumption affect	consume alcoholic ets your ability to j	beverages or uppractice law on	se drugs in such quantities that your a day-to-day basis?		
	Yes_	No					
19.b.	If yes	s, explain full	у				
20.	Lega	Legal practice experience in the preceding four years.					
	Name	Name any two cases in which you served as counsel and you consider that you did well as counsel.					
	A.	Civil cases	s:		Counsel for:		
	(i)						

Name of court(s)	(i) (ii)		
Subject matter of lit		<i>(</i> *)	
Outcome of case	(i) (ii)		
Criminal cases:			Counsel for:
Name of court(s)	(;)		
Name of court(s)	(i) (ii)		
Charge/charges	(i)		
Judgment/verdict	(ii) (i)		
During the precedin	(ii) ag four ye		have you practiced law?
Privately	, or in pa	ırtnership _	, or in government
Or other	(comple	te details be	elow)
(i) With the law	v firm of		
In the state of			, country of
(ii) With the gov	vernmen	t of	
With the departmen	t of		

		in the state of	, country of
		(iii) With the agency/entity/comp	any of
		In the state of	, country of
	D.	I have been admitted to the bars of the	ne following jurisdictions:
		Jurisdiction	date
		Jurisdiction	date
		which you are admitted. Also, you n	ificate of admission for each jurisdiction in nust submit a copy of certificate of good United States in which you are admitted. s application
21.	Have y	you ever served as counsel in a case w	here title to land was involved?
	Yes _	No	
	If yes,	, state jurisdiction, tribunal and date	
22.a.	2.a. Have you ever been a party to any civil action?		
	Yes _	No	
22.b.	.b. If yes, explain the nature of the case, the court or tribunal, the date, your involvement the resolution of the case.		ert or tribunal, the date, your involvement and
23.a.	Have y	you had any traffic violations in the pa	st 3 years in any jurisdiction?
		No	
23.b.	If yes, resolu	, explain the violation, the court or tribution of the violation.	unal, the date of the violation, and the
24.a.	Have y	you ever been cited, arrested, charged	or convicted for any violation of criminal law

Vac	_ No
	blain the violation, the court or tribunal, the date of the action, and the resolution
	refused to submit to a test to determine whether you had consumed and/or were influence of alcohol or drugs?
Yes	_ No
such test,	blain fully. Include in your explanation the date you were asked to submit to the type of test requested, the name of the person or entity that asked you to the test, the outcome of your refusal and the reason why you refused to submit test.
Within th	a most 2 years have you had any debte including loans that have been more
than 90 d	e past 3 years, have you had any debts, including loans, that have been more ays past due?
Yes	_ No
If yes, exp	plain fully
Have you	ever defaulted on any loans?
Yes	_ No
If yes, exp	plain fully
Have you	ever had a credit card or charge account revoked?
Yes	_ No
If yes, exp	plain fully
Have you	ever been accused of mishandling, mismanaging, or stealing the money or
property of	
Yes	_ No

Do yo to car	bu know of any factors that would impair your ability to competently practice law or ry out your ethical responsibilities to clients or as an officer of the court?				
Yes_	No				
If yes	explain fully				
Do yo	ou currently use illegal drugs?				
Yes_	No				
If yes	explain fully				
you h	ences. State the names and addresses of two references in each jurisdiction where ave practiced law or worked. References should be persons with whom you are nally acquainted and may be those who are your former or present employers. Do at anyone as a reference who is related to you by blood or by marriage.				
A.	Reference for jurisdiction of				
Name	Occupation				
Addre	ess				
Telep	hone numberYears known				
B.	Reference for jurisdiction of				
Name	Occupation				
Addre	ess				
Telep	hone number Years known				
Refer blood profes from	References. State the names and addresses of two clients who are not related to you by blood or by marriage. If you have not had clients, substitute the names of two law professors, other attorneys or trial assistants. The persons listed here must be different from those listed in item 32.				
A.	Reference for jurisdiction of				
	Occupation				

Address		
Telephone number	Years known	
B. Reference for jurisdiction of		
Name	Occupation	
Address		
Telephone number	Years known	
ACKNO	OWLEDGMENT	
I have read this document and have a answers are complete and true to the best of	answered all questions fully and honestly. The my knowledge.	
I understand that this application is of a continuing nature and must correctly and fully provide the information in this application as of the date of my appearance to be sworn in as an attorney or as a trial assistant to practice law in the Republic of the Marshall Islands. I will, therefore, before my appearance, notify the Chief Justice of the High Court, in writing, of any change in the information requested and submitted in this application.		
	Signature of Applicant	
Subscribed and sworn before me this	s day of	
	Notary public	

AUTHORIZATION AND RELEASE

I,
born at
on, 19
having filed an application for admission to practice law in the Republic of the Marshall Islands (Republic), hereby apply for a character report and consent to have an investigation made as to my moral character, professional reputation, and fitness for the practice of law and such other information as may be received all of which will be reported only to the admitting authority. I agree to give any further information which may be required concerning my past record. I understand that the content of my character report and investigation are confidential.
I also authorize and request every person, firm, company, corporation, governmental agency, court, association, or institution having control of any documents, records, and other information pertaining to me, to furnish the Chief Justice of the High Court of the Republic any such information, including documents, records, files regarding charges or complaints filed against me, including any complaint erased by law, whether formal or informal, pending or closed, or any other pertinent data, and to permit the Chief Justice of the High Court, or any of his agents or representatives to inspect and make copies of such documents, records or other information. The records, however, will not include any information with respect to a juvenile offense.
I hereby release, discharge and exonerate the Chief Justice of the High Court, his/her agents and representatives, and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing of such documents, records, and other information or the investigation made by the Chief Justice of High Court.
I have read the foregoing document and have answered all questions fully and frankly. The answers are complete and are true of my own knowledge.
Signature of Applicant
Subscribed and sworn before me this day of
Notary Public

CERTIFICATE OF MORALS AND CHARACTER REQUIREMENTS OF RULE IV FOR ADMISSION TO PRACTICE LAW AS AN ATTORNEY IN THE REPUBLIC OF THE MARSHALL ISLANDS

I,		, d	lo hereby certify that no criminal charge nor any charge
for violation of pr	ofessional ethics or res	ponsibili	ty is currently pending against me and that I have never
been convicted of	any crime or found in	violation	of a rule of professional ethics or responsibility.
Date:	,	20	
		_	
	FOR ADM AS A	IISSION AN ATT	VICE OF LEGAL DOCUMENTS N TO PRACTICE LAW ORNEY IN THE E MARSHALL ISLANDS
Ι,			_, do hereby certify that the address upon which
legal documents	may be served upon	me, and	which service will be binding, is as set forth below:
-			
Fax No.			
EIIIaII			
Date:	, 20	•	
		-	

CERTIFICATE OF FAMILIARITY WITH THE CONSTITUTION AND THE REVISED CODE AND COMPLIANCE WITH APPLICABLE RULES FOR AN ATTORNEY IN THE REPUBLIC OF THE MARSHALL ISLANDS

I,	, do hereby certify that I have read and I am
familiar with the Constitution	n of the Republic of the Marshall Islands and the Marshall Islands
Revised Code and if admitte	d will meet all of the requirements of the RMI Rules for Admission
to Practice Law, as amended	d from time to time.
Date:	, 20