

GENERAL APPLICATION FOR GOVERNMENT ATTORNEYS

1. Applicant's Name: _____
Last First Middle

Have you ever been known by any other name? Yes No

If yes, please provide details stating in full every other name by which you have been known and inclusive dates. If name change was made by court order, attach order to this form.

2. Physical Address:

Street, Apt. No.			Village/City	
State/Territory			Zip Code	
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Cell Phone Number	Alternate Number	Fax Number		

3. Mailing Address (if different from above):

PO Box Number	Village/City
State/Territory	Zip Code

4. Primary Email Address: _____

Alternate Email Address: _____

Note: The Primary Email address will be used for all future communication with Applicant and Applicant should immediately notify bar administrator of changes to email addresses.

5. Date of Birth: _____ Birth Place: _____
Month / Day / Year Village/City State/Territory Country

6. Are you a resident of the Commonwealth? Yes No

If yes, when did you become a resident? _____
Month / Year

7. Current Government Agency Employer: _____

8. Date of Hire at Current Government Agency Employer: _____
Month / Day / Year

9. Please list every other jurisdiction which you are now, or were ever, admitted to practice law in and the dates of admission:

Jurisdiction	Dates of Admittance
Jurisdiction	Dates of Admittance
Jurisdiction	Dates of Admittance
Jurisdiction	Dates of Admittance

10. Have you ever applied for admission to the Commonwealth of the Northern Mariana Islands Bar Association before? Yes No

If yes, please attach declaration detailing dates, admission status and circumstances of application.

By signing this Application, the Applicant hereby swears:

The answers contained in this Application and all accompanying documents are complete and true to the best of my knowledge. I understand that the information provided in this Application and all accompanying documents is submitted under oath and the failure to answer or to make full disclosure on this or any application material may be grounds for denial of my application for admission to the Bar. Upon satisfying all of the requirements for admission to the Commonwealth of the Northern Mariana Islands Bar, I hereby apply for admission to practice law in the Commonwealth of the Northern Mariana Islands.

Signed: _____
Applicant

Date: _____

FOR OFFICE USE ONLY

Recd by:

Postmark date:

C&F

Exmp

Enclosed:

Form B Form C Form D

NCBE App. NCBE Rel./Auth C&F Fees

Ed. Q. Cert Letter Cert of Stnd