

IN THE SUPREME COURT OF MISSOURI
Application for Certificate to Practice Temporarily
for Lawyers Applying for Admission to The Missouri Bar

Applicant's Full Name:

Last 4 SSN:

Telephone number:

E-mail Address:

Street Address:

City:

State/Province:

Zip/Postal Code:

Country:

I, _____, declare under penalty of perjury:

- (1) that I have applied for admission to practice law in Missouri under Rule 8.07, Rule 8.09, Rule 8.10, Rule 8.105 or Rule 8.106;
- (2) that I have not previously failed the Missouri bar examination;
- (3) that I am an active member in good standing of the highest court of a state or territory of the United States;
- (4) that I am not under suspension or disbarment by any court of record or the subject of any pending disciplinary complaints;
- (5) that I am not ineligible for admission under Rule 8.04;
- (6) that I will be supervised as provided in Rule 4-5.1 by the active Missouri licensed attorney whose name and bar enrollment number are shown below:

Supervising Attorney's Name

MO Bar #

- (7) that attached to this application is a statement from the supervising lawyer agreeing to the specified supervision;
- (8) that I understand this application for a certificate to practice law in this state temporarily must be approved by the Court;
- (9) that if I am issued a certificate to practice law in this state temporarily, it will be valid for 12 months from the date it is issued, unless revoked before the expiration of 12 months;
- (10) that the certificate shall be revoked immediately without further action by the Court if I
 - (1) Fail the bar examination,
 - (2) Fail to take the bar examination when eligible to do so,

- (3) Am denied permission to take the bar examination or denied approval on character and fitness grounds
- (4) Am denied admission without examination or limited admission as in-house counsel and am not permitted to take the bar examination in lieu thereof;
- (5) No long meet the qualifications prescribed in Rule 8.06(a);

(11) that I have thoroughly familiarized myself with and will abide by Supreme Court Rule 4, Rules of Professional Conduct;

(12) that I acknowledge the jurisdiction of the Supreme Court of Missouri and Chief Disciplinary Counsel over my professional conduct.

I hereby swear (or affirm) under penalty of perjury, that all statements herein were made by me and are true and complete.

Dated this _____ day of _____ 20 _____.

Signature of Applicant

State of _____)

County of _____)

Subscribed and sworn to before me this _____ day of _____ 20_____.

Notary Public

[Seal or stamp must be affixed]

In the Application of:

(Applicant's Full Name)

STATEMENT OF SUPERVISING ATTORNEY

(Supervising Attorney's Full Name and Missouri Bar Number)

I state that I am an active member in good standing of the Missouri Bar.

If the above-named applicant is granted a certificate to practice law in Missouri temporarily pursuant to Rule 8.06, I agree to exercise supervisory responsibility for the applicant as provided in Rule 4-5.1 during the period that the certificate is valid.

Signature of Supervising Attorney

Supervising Attorney's Name

Street Address

City, State, Zip

Telephone & Email

(List Above Supervising Attorney's Business Address, Telephone Number & Email Address)