IN THE SUPREME COURT OF MISSOURI

Application for Certificate to Practice Temporarily for Lawyers Applying for Admission to The Missouri Bar

Appl	licant's Full Name:	Last 4 SSN:			
Telephone number:		E-mail Address:			
Stree	et Address:				
City:	State/Prov	vince: Zip/Postal Code:			
Cour	ntry:				
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 longer 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 sw	orn 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)