

The State Bar of California

APPLICATION FOR DETERMINATION OF MORAL CHARACTER

FORM 1-RECORD OF CIVIL ACTIONS AND ADMINISTRATIVE PROCEEDINGS

Please complete this form if you answered "Yes" to questions 2, 34, 35, 36, 37, and/or 53 on the Determination Application, or questions 2, 33, 34, 35, 36, and/or 50 on the Extension Application.

Name:	File Number:					
Nature of case (e.g., small claims, divorce, personal injury, etc.):						
Complete title of case:						
Court file number:	Date filed:					
Name of court:						
Address:						
City:						
Your position in case (e.g., plaintiff, defendant, cross-complaint, etc.):						
Elaborate on the circumstances of the case. If you need more space, please attach a separate						

sheet of paper.

Full name(s) and address(es) of plaintiff(s) and Full name(s) and address(es) of defendant(s) attorney(s)

and attorney(s)

Plaint	iff			Defendant				
Addre	255			Address				
City		State	Zip	City	State	Zip		
Attor	ney			Attorney				
Addre	255			Address				
City		State	Zip	City	State	Zip		
Trial da	ate:			Date of final dispositior	ı:			
Dispos	ition:							
 Did the court issue a judgment for monetary damages? N/A Yes No (if "Yes" please complete the fields below; if "No" skip to question 2) 								
Amount of judgment:								
Party against whom the judgment was issued:								
Has the judgment been satisfied? 🗌 Yes 🗌 No								
Date judgment was satisfied:								
If the judgment has not been satisfied, please provide an explanation:								
2.	Please describe	any nonmonet	ary relief	granted by the court:				