



CALIFORNIA BOARD OF LEGAL SPECIALIZATION OF THE STATE BAR OF CALIFORNIA

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POST-EXAMINATION APPLICATION FOR CERTIFICATION Estate Planning, Trust and Probate Law Certified Specialist

(Filing Fee - \$300*)

**For credit card payments, a processing fee of 2.25% will be added to all charges. There is no processing fee associated with payments by check*

Applicants who have successfully passed the 2017 Legal Specialization Examination must submit this application along with the required \$300 filing fee by **April 24, 2019** or submit a request for an extension to legalspec@calbar.ca.gov by that date. The most common reason for an extension is to gain the five required years of practice in the specialty. Extensions cannot be granted beyond January 31, 2021.*

Interested applicants who have not passed a legal specialist examination should visit www.californiaspecialist.org for up-to-date examination information and to review the rules and standards applicable to your specialty area.

POST-EXAM ELIGIBILITY

1. I passed the Legal Specialization Examination administered in October _____ (Year)

CONTACT INFORMATION

2. Name (exactly as it appears on your State Bar Profile)

3. Address (as it appears on your State Bar Profile)

Street: _____

City: _____ State: _____ Zip: _____

4. Bar Number: _____ 5. Daytime Phone Number: _____

6. E-mail Address: _____

LICENSE/CERTIFICATION INFORMATION

7. List all jurisdictions in which you are licensed or have been licensed to practice law:

Jurisdiction	Bar Card/ I.D. Number	Date Admitted

8. List any professional licenses or legal certification(s) you may have previously obtained:

Professional Organization	Professional License (i.e. CPA)	Date of Licensing/ Certification

PRACTICE REQUIREMENT

9. Check the box below that applies to your time in practice in the specialty area, adding additional documentation if requested:

- I have practiced law continuously for the last five years, during which I devoted an average of at least 25% of the time to practice in the specialty area.
- While I have had breaks in practice over the last five years, I have practiced law for at least five years, and have devoted an average of at least 25% of the time to practice in the specialty area during at least five years (Please attach a letter summarizing your time in practice, including the nature and frequency of practice in the specialty area).
- I have not yet practiced in the specialty area for five years, but I believe I have met the remaining requirements for certification in the specialty area, and I understand that while processing on my file will begin, certification will not take place until I have been practicing in the specialty area for at least five years for at least 25% of the time. (Please attach a letter summarizing your time in practice, including the nature and frequency of practice in the specialty area).

EMPLOYMENT HISTORY

10. The following is a complete statement of my employment since my admission to practice law:

LIST MOST RECENT EMPLOYMENT FIRST. ATTACH SEPARATE SHEETS IF NECESSARY

CHECK HERE IF ADDITIONAL SHEETS ARE ATTACHED.

Dates of Employment	Employer	Employers Address	Nature of Employment (summarize nature of work performed)

DISCIPLINE

11. Since your admission to the State Bar of California

- a. Have you been disbarred, suspended or disciplined by the State Bar of California or similar attorney disciplinary authority or any other authority that imposes professional discipline in California, or in another state or jurisdiction, including a foreign jurisdiction? Yes No
- b. Do you have any discipline charges pending as described above? Yes No
- c. Have you had any felony convictions? Yes No
- d. Did you resign from any bar, court or body before whom you appear? Yes No
- e. Have there been three or more judgments of professional negligence against you? Yes No
(If yes, please attach the relevant documents.)
- f. Have any sanctions, other than discovery sanctions, been entered against you by any court or body before whom you appear? Yes No
- g. Have any findings of contempt been made against you by any court or body before whom you appear? Yes No

IF YOU ANSWER YES TO ANY OF THE ABOVE, YOU MUST PROVIDE FULL DETAILS ON A SEPARATE SHEET. A record of discipline or failure to disclose any of the information requested above may constitute grounds for denial of your application.

DECLARATION

I hereby authorize all educational institutions, governmental agencies and instrumentalities (including bar associations and bar examiners of other jurisdictions), employers and business and professional associates (past and present), to release to the California Board of Legal Specialization ("CBLS") and/or its agents or advisors any non-privileged information, files or records requested by them for the purpose of processing this application. The foregoing release does not apply to matters communicated by me in confidence to any lawyer, spouse, physician, psychotherapist or clergyperson for which I have privilege of nondisclosure under the provisions of Chapter 4, Division 8 of the California Evidence Code.

I further authorize the CBLS to conduct independent inquiry and review, including contacting the references I provide and other references within the discretion of the CBLS and agree that neither I nor my agents will seek to review the materials collected during the evaluation of my application.

I agree to pay all fees required by the CBLS when due.

I agree to abide by all rules and regulations of the CBLS as amended from time to time and to furnish to the CBLS and the Estate Planning, Trust and Probate Law Advisory Commission, such information as they may require, to determine my entitlement to certification.

I am the applicant herein for certification as an estate planning, trust and probate law certified specialist under the State Bar of California Program for Certifying Legal Specialists. I fully understand that failure to make a truthful disclosure of any fact, item or information required may result in the denial of my application, revocation of my certificate of specialization, or disciplinary action by the State Bar of California. I have carefully read and answered each question completely and truthfully in the foregoing application and any attachments hereto, and certify that the information therein is true and correct to the best of my knowledge.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration is executed on:

Date: _____

Print Name: _____

Signature: _____

TASK AND EXPERIENCE REQUIREMENT ATTACHMENT A

Applicant Name: _____ Bar Number: _____

The Estate Planning, Trust and Probate Law Advisory Commission may require additional evidence of completion of the tasks and experience as indicated in this Attachment A.

1. PRACTICE EXPERIENCE

Within the five years immediately preceding submission of this application, I have substantially participated in the performance of the following number of tasks in two of the following five categories. *(Each task may be counted in only one category.)* **REFER TO SECTION 2.0 OF THE STANDARDS FOR ADDITIONAL INFORMATION.**

CHECK THE BOXES THAT APPLY

- a. Thirty tax planning matters, tax procedures, or tax returns, for at least 20 separate clients. These may include, but not be limited to: tax opinions, memoranda, advice letters; tax-sensitive wills, trusts, or other dispositive instruments; audits or other administrative tax examinations, ruling requests; and estate, gift, fiduciary, or personal income tax returns.
 - b. Fifty estate and incapacity plans, at least 20 of which must include tax issues. Portions of a plan may comprise the following: wills, trusts, custodianship, documents of title, beneficiary clauses, property agreements, powers of attorney, advanced health care directives, gifts, powers of appointment, disclaimers, public benefit plans. *A single document may not be sufficient to comprise an entire plan. Multiple documents for a client, or for a husband and wife together, comprise a single plan.*
 - c. Forty administration procedures, for at least 20 separate clients, for estates, trusts (court or non-court), powers of attorney, advanced health care directives, custodianship, conservatorship, guardianships, spousal management procedures, or other procedures under the Probate Code or predecessor provisions.
 - d. Completed transfers, by administration or otherwise, of a decedent's assets upon deaths of 40 persons, including tax issues, tax returns or tax basis problems in at least 10 of the completed transfers. These may include, but not be limited to: trust terminations, terminations of joint tenancy, and summary probate procedures, including spousal property petitions.
 - e. Twenty litigated matters or contested hearings, relating to any of the above categories, for at least 10 separate clients. These may include, but not be limited to: will/trust contests, determinations of heirship, objections to accountings, fiduciary appointment/removal, creditors' claims, constructive trusts, family protection proceedings, asset ownership disputes, tax matters, elder abuse.
- 2. PRACTICE DESCRIPTION - YOU MUST INCLUDE A PRACTICE DESCRIPTION ON A SEPARATE SHEET**

- Provide a description of your estate planning, trust and probate law practice:
 - a. Noting especially:
 - (1) the nature of the tasks you routinely perform that you have relied on in seeking qualification as an estate planning, trust and probate law specialist; and
 - (2) any unusual and/or special situations you typically handle (e.g., planning for, and administration of, closely held farms, business interests or ranches; planning substantial charitable gifts; planning for unmarried couples and remarried individuals).
 - b. Describe briefly the kinds of tax tasks you routinely perform in connection with your estate planning, trust and probate law practice (e.g., preparation of Forms 706, 709, 1040 [Final] and/or 1041; Q-Tip, 303, 2032A and/or 6166 elections; Requests for Extension of Time; Disclaimers, etc.).

3. PRACTICE PROFILE - COMPLETE THE FOLLOWING:

a. What portion of your practice is devoted to:				
(1) Estate Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Estate Administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) Estate Related Litigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Of the estate planning you do, what portion of your clients are:				
(1) 18-35 years old	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) 36-65 years old	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) Over 65 years old	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. What percentage of your <u>primary</u> estate planning documents are (the aggregate may exceed (100%):				
(1) Non-trust wills (ignore pour-over wills)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Wills dealing with children (including guardianship and/or CUTMA provisions)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) Tax-sensitive wills (involving marital deductions, charitable bequests, GSTT problems, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. What percentage of your <u>primary</u> estate planning documents are (the aggregate may exceed (100%):				
(1) Non tax-sensitive trusts (for the benefit of children and/or parents, "special needs" trusts, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Tax-sensitive trusts (exemptions equivalent bypass trusts, Q-TIP trusts, complex charitable trusts, generation skipping trusts, life insurance trusts, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) Revocable living trusts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) Testamentary trusts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. What percentage of your <u>primary</u> estate planning documents are (the aggregate may exceed (100%):				
(1) To effectuate gift programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) To effectuate living trusts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) To effectuate charitable transfers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) In support of MediCal planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. What percentage of your <u>primary</u> estate planning documents are (the aggregate may exceed (100%):				
(1) MediCal/Medicaid planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Durable powers of attorney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
re: assets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
re: health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Of the estate administration you handle (this section should total 100%), what portion is:				
(1) Court supervised <i>inter vivos</i> administration (e.g., guardianships, conservatorships, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Court supervised post mortem administration (e.g., probates, spousal property set asides, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) Non-court supervised <i>inter vivos</i> administration (e.g., powers of attorneys, trust administration, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) Non-court supervised post mortem administration (e.g., joint tenancy termination, living trust termination, collection of insurance/retirement benefits, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**EDUCATION REQUIREMENT
ATTACHMENT B
Total Educational Reporting**

Applicant Name: _____ Bar Number: _____

In order to satisfy the education requirement for initial certification, you must have completed at least 45 hours of education in the substantive area as described below **within the three years immediately preceding submission of this application**. One-half, or 22.5 hours, may be satisfied with alternative educational activities, sometimes also called non-participatory activities, in which your participation is not verified by an independent party such as the educational provider.

ON ATTACHMENT B-1*, list the educational activities pre-approved for legal specialist credit that you have attended or taught. Refer to Attachment B-1 for the type of documentation required.

ON ATTACHMENT B-2*, list the educational activities you have attended or taught that were not specifically approved for legal specialist credit, but were approved for MCLE credit and concern the direct legal subject matter in the specialty area. Refer to Attachment B-2 for a further explanation and the type of documentation required.

ON ATTACHMENT B-3, list any alternative educational activities that you have completed to satisfy the education requirement. Keep in mind that, with the exception of approved tapes, hours claimed for alternative educational activities are subject to approval and/or adjustment by the CBLs.

REMEMBER: Courses taken to fulfill the MCLE special topic requirements (legal ethics, substance abuse/competency, elimination of bias) CANNOT be used to satisfy the education requirement for certification unless they specifically discuss the substantive law of your specialty area.

Summarize your hours in the grid provided below.

SUMMARY OF EDUCATION ACTIVITIES (INCLUDING ALTERNATIVES)

HOURS ATTENDED OR TAUGHT** (total from B-1 + B-2)	HOURS OF ALTERNATIVE EDUCATION (total from B-3)	TOTAL (minimum of 45 hours)

***YOU MUST SUBMIT A CERTIFICATE OF ATTENDANCE FOR EACH COURSE BEING CLAIMED ON ATTACHMENTS B-1 & B-2.** Applications received without certificates, or missing certificates, will be considered incomplete. Please note that the provider is required to give you a certificate of attendance. If you did not receive a certificate, contact the provider directly.

**You may claim four hours for each hour that you taught a new or substantially updated course.

**EDUCATION REQUIREMENT
ATTACHMENT B-1
Education Approved for Legal Specialist Credit**

Applicant Name: _____ Bar Number: _____

On this attachment, list the educational activities you have attended or taught that were specifically pre-approved for legal specialist credit. Providers of approved legal specialist activities are subject to the same requirements as MCLE providers, so you should have been provided with a **certificate of attendance** indicating that the activity was approved for legal specialist credit and stating the number of hours of credit you received.

COPY THIS ATTACHMENT IF ADDITIONAL LINES ARE NEEDED IN THE TABLE BELOW.

DOCUMENTATION REQUIRED FOR EACH ACTIVITY: Certificate of attendance. The provider is required to give you a certificate of attendance. If you did not receive a certificate, contact the provider directly.

NAME OF PROGRAM SPONSOR OR APPROVED PROVIDER	NAME OF PROGRAM	HOURS ATTENDED	HOURS TAUGHT 1 st TIME*	HOURS TAUGHT REPEAT*	DATE COMPLETED

*Calculate credit for teaching as follows: Under Hours Taught First Time, record the actual number of hours of speaking time multiplied by four. On that same line, if there was also a portion of the class in which another speaker was teaching, claim actual hours for that time. If it was a repeat presentation that you have taught before with the same content, you may claim only actual speaking time. In that case, record your hours under Hours Attended.

**EDUCATION REQUIREMENT
ATTACHMENT B-2
Classes Approved Only for MCLE Credit**

Applicant Name: _____ Bar Number: _____

On this attachment, list the educational activities you have attended that were approved for MCLE credit and specifically teaching the law of your specialty areas, but NOT specifically pre-approved for legal specialist credit. The CBLS has discretion as to whether to approve these courses. Do not include alternative educational activities for which the provider does not issue a certificate on this page. Rather, list them on Attachment B-3.

COPY THIS ATTACHMENT IF ADDITIONAL LINES ARE NEEDED IN THE TABLE BELOW.

DOCUMENTATION REQUIRED FOR EACH ACTIVITY: Certificate of attendance, plus sufficient information for the CBLS to determine whether credit should be granted if the title and program sponsor do not make this clear (for example, promotional materials, a brief description of the program, course outline, list of instructors).

NAME OF PROGRAM SPONSOR	NAME OF PROGRAM	HOURS ATTENDED	HOURS TAUGHT 1 st TIME*	HOURS TAUGHT REPEAT*	DATE COMPLETED

*Calculate credit for teaching as follows: Under Hours Taught First Time, record the actual number of hours of speaking time multiplied by four. On that same line, if there was also a portion of the class in which another speaker was teaching, claim actual hours for that time. If it was a repeat presentation that you have taught before with the same content, you may claim only actual speaking time. In that case, record your hours under Hours Attended.

**EDUCATION REQUIREMENT
ATTACHMENT B-3
Alternative Education**

Applicant Name: _____ Bar Number: _____

On this attachment, list the alternative methods you used to satisfy the legal specialist education requirement. Your participation in these activities is self-verified, so the provider does not provide a certificate of attendance. Remember that no more than one-half (1/2) of your requirement can be satisfied in this manner, except for course under options 4 and 5.

Note that webinars and tapes can sometimes be participatory activities that should be reported on B-1 or B-2 if they involve some sort of independent verification of attendance, such as a test during or after the class; in this case, the provider will provide a certificate of attendance.

If you are submitting activities that require CBLS approval, please provide sufficient information to allow evaluation of the self-study. Reading of treatises on your own is generally not approved.

The CBLS may require additional information regarding alternative education activities.

ALTERNATIVE EDUCATION	# HOURS REQUESTED
1. Self-verified listening to and/or viewing of a complete audio or audio/visual reproduction of a program approved for legal specialist credit or MCLE credit if the subject is your substantive area of law. Such tapes must involve current law. <u>LIST THE ACTIVITIES AND HOURS REQUESTED FOR EACH ON A SEPARATE SHEET.</u>	
2. Self-verified participation in MCLE-approved audiovisual activities, including interactive video instruction or webinars, if the subject is your substantive area of law. <u>LIST THE ACTIVITIES AND HOURS REQUESTED FOR EACH ON A SEPARATE SHEET.</u>	
3. Authoring or co-authoring published articles, chapters or books in the substantive area of law. PLEASE SUBMIT A COPY OF THE MATERIALS FOR WHICH YOU ARE CLAIMING CREDIT. Credit generally will not be awarded for reading or editing. The hours of credit to be allowed shall be determined by the CBLS after consideration of the amount and quality of the submitted materials. Estimate the time you spend preparing the materials, up to a maximum of half of your total educational requirement as noted above.	
4. Completion of an advanced postgraduate course at an accredited law school that includes education in your specialty, such as an LL.M. The hours of credit to be allowed shall be determined by the Commission based upon the amount and quality of professional education involved. Note that this option can be used to fully satisfy your educational requirement and it is not subject to the cap noted above. NAME OF LAW SCHOOL: _____ COURSE COMPLETED: _____ DATE COMPLETED: _____	
5. Teaching a course in the specialty area at an accredited law school. The hours of credit to be allowed shall be determined by the CBLS based upon the amount and quality of professional education involved. If teaching a course as an adjunct or guest lecturer, claim four hours per speaking hour. If serving as the course professor, claim twelve hours per credit hour. Note that this option can be used to fully satisfy your educational requirement and it is not subject to the cap noted above. NAME OF INSTITUTION: _____ NAME OF COURSE: _____ BRIEF DESCRIPTION: _____ AUDIENCE (LAW STUDENTS, ATTORNEYS, ETC): _____ DATE COMPLETED: _____	

INDEPENDENT INQUIRY AND REVIEW ATTACHMENT C

Applicant Name: _____ Bar Number: _____

Please submit the names of a minimum of three attorneys or judges who have had an opportunity to observe your work and who can attest to your proficiency in the practice of the specialty area under the laws applicable to the specialty in California.

To expedite your application, please include the following among your references if possible: opposing counsel, attorneys from other firms, and judges, commissioners or magistrates before whom you have appeared. References may include attorneys who are clients, partners, associates, employers or employees. Note, however, that references will be asked to disclose any such relationship.

References will be contacted by the State Bar of California via questionnaire. The information gathered shall be the property of the State Bar of California and shall not be revealed to you.

Include each reference's California bar membership number to insure that reference forms are sent promptly and to the right individual. Bar numbers can be found online at www.calbar.ca.gov under Attorney Search. If the attorney does not have a California Bar number or is a judge, please provide a full address.

NAME AND BAR NUMBER	ADDRESS
1.	
2.	
3.	
4.	
5.	
6.	



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Legal Specialization Post-Examination Application for Certification Credit Card Authorization Form

Attorney Name: _____ Bar Number: _____

Address: _____

City, State, Zip: _____

Telephone: _____ E-mail Address: _____

DESCRIPTION	FEE
Legal Specialization Post-Examination Application for Certification Fee	\$300
Credit Card Payment Processing Fee* (2.25%)	\$6.75
TOTAL	\$306.75

**For credit card payments, a processing fee of 2.25% will be added to all charges. There is no processing fee associated with payments by check.*

This form may not be used to pay dues or other attorney fees; it only may be used to pay fees related to Legal Specialization. **Please print legibly.**

Credit Card Number: _____

Credit Card Security Code: _____ Expiration Date (Month/Year) _____

Credit Card Type: Visa MasterCard Discover American Express

Name on Card: _____

Signature of Card Holder: _____ Date: _____

By my signature on this document, I/we hereby authorize The State Bar of California to charge my/our Visa, MasterCard, Discover, or American Express account for the amount listed in the 'Total' box above.

SUBMISSION INFORMATION

MAIL TO:
The State Bar of California
Department of Legal Specialization
180 Howard Street
San Francisco, CA 94105

OR

FAX TO:
(415) 538-2180