



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: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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 attorney(s)

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

Plaintiff

Defendant

Address

Address

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City	State	Zip	City	State	Zip
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Attorney	Attorney
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Address	Address
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City	State	Zip	City	State	Zip
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Trial date: \_\_\_\_\_ Date of final disposition: \_\_\_\_\_

Disposition: \_\_\_\_\_

If the disposition resulted in a judgment, has the judgment been satisfied?

Yes       No

If YES, give the date the judgment was satisfied:

\_\_\_\_\_

If NO, what amount is still owing and why?

\_\_\_\_\_