INSTRUCTIONS FOR APPLICATION FOR EXTENSION OF DETERMINATION OF MORAL CHARACTER

Please carefully read these instructions. Each applicant is required to be aware of all requirements that follow and to comply with each one that is applicable. The completed application form must be typewritten or legibly printed in ink.

In answering questions appearing on the Application for Extension of Determination of Moral Character, applicants should consider the following:

Rule 4.40, Title 4, Division 1, Chapter 4 of the Rules of the State Bar of California (Admissions Rules) states:

(A) An applicant must be of good moral character as determined by the Committee. The applicant has the burden of establishing that he or she is of good moral character.

(B) “Good moral character” includes but is not limited to qualities of honesty, fairness, candor, trustworthiness, observance of fiduciary responsibility, respect for and obedience to the law, and respect for the rights of others and the judicial process.

Rule 4.41(A) of the Admissions Rules states:

“...An attorney who is suspended, disbarred, or otherwise not in good standing in any jurisdiction may not submit an application.”

RULES OF THE STATE BAR OF CALIFORNIA

The Application for Extension of Determination of Moral Character will be processed in accordance with Title 4, Division 1, of the Rules of the State Bar of California (Admissions Rules). Current Admissions Rules are available online at http://admissions.calbar.ca.gov/ or upon request from the Office of Admissions.

SUBMITTING THE APPLICATION

After completing and signing the application form, the form, fingerprint cards or a completed Request for Live Scan Service form, any necessary attachments and correct fees in the form of a cashier’s check or money order payable to The State Bar of California must be mailed in an envelope to the following address:

Office of Admissions
The State Bar of California
845 S. Figueroa Street
Los Angeles, CA 90017-2515

FEES AND FILING INFORMATION

Application for Extension of Determination of Moral Character $265.00

THE FEES ARE SUBJECT TO CHANGE

The payment coupon must be detached from the application form and completed. The applicant’s name, file number, and amount paid must be written on the coupon. Make money order/cashier’s check payable to the State Bar of California. Personal checks will not be accepted.
APPLICATION FOR EXTENSION

When an Application for Determination of Moral Character is about to expire, in order to avoid completing that form again, an applicant must submit an Application for Extension of Determination of Moral Character (extension application). An extension application must be filed by an applicant no sooner than every 30 months and no later than every 36 months after an initial determination of good moral character has been made by the Committee of Bar Examiners ("Committee"), and after each subsequent determination, until such time as the applicant is certified for admission to practice law in California. The extension application must be accompanied by the fee specified in the schedule of fees published by the Committee and by two sets of fingerprints or a completed Request for Live Scan Service form. The extension application must be submitted in substantially complete form as defined by the Committee, and must be received in the Los Angeles Office of Admissions on or before the expiration date.

REAPPLICATION SUBSEQUENT TO RECEIPT OF AN ADVERSE MORAL CHARACTER DETERMINATION OR WITHDRAWAL UNDER CHAPTER 4 OF THE ADMISSIONS RULES

Following the expiration of the designated time period, applicants who have received an adverse moral character determination or withdrew their application under Chapter 4 of the Admissions Rules (Moral Character) must file a complete Application for Determination of Moral Character online.

COMPLETION OF INVESTIGATION

Applications for Extension of Determination of Moral Character generally will be processed in a minimum of 180 days, unless there are issues in an applicant's background that require further investigation and/or review by the Committee.

Failure to file your extension application in a timely manner could delay your admission to practice law.

During the course of each investigation, the Committee routinely contacts many sources and outside agencies; therefore, staff is not in a position to provide information on the status of the investigation until approximately 120 days have elapsed. If in the course of the investigation staff requires further information or documentation, applicants will be contacted prior to the completion of the investigation. All applicants will receive written notification when the investigation has been completed.

Any questions regarding the status of an application after the lapse of 120 days should be made in writing rather than by telephone.

COMPLETION OF APPLICATION

All questions on the application must be answered. If a certain question does not apply to an applicant, the applicant should so indicate this and explain. Before filing the application, applicants should check to ensure that all questions have been answered, all applicable forms have been completed and attached and the application is signed. Applicable forms must be printed from the State Bar's website at http://admissions.calbar.ca.gov/MoralCharacter.aspx or requested through the Los Angeles Office of Admissions at (213) 765-1521. The application must be signed, the correct fee included, and a completed Request for Live Scan Service form or two (2) completed fingerprint cards with the Request for Exemption From Mandatory Electronic Fingerprint Submission Requirement form must be included. Any application not meeting these requirements is considered incomplete, and will not be considered filed until it is brought to a complete status. The application must be received in the Office of Admissions within 30 days of the date the application was signed. If it is not received within 30 days of the date the application was signed, the application will be returned to the applicant with a blank Authorization and Release form that the applicant will be required to complete, sign and return to the Office of Admissions, along with the application.

If the application form does not provide sufficient space for the response to any question, the response should be continued on a separate piece of paper and attached to the back of the application.

Each applicant should retain a copy of his/her completed application for reference in the event that another application must be filed in the future.
APPLICATION ABANDONMENT

Applications for Extension of Determination of Moral Character (Extension Application) that are not brought to a complete and filed status within 60 days of receipt will be abandoned. This includes the lack of requisite fees, signature, or either two completed fingerprint cards or a completed Request for Live Scan Service form. Once an extension application is in filed status, if the applicant receives notice to provide information and or documentation but does not provide such information/documentation within 90 days of the request, the extension application will be abandoned. No refund of fees will be paid in the event a moral character extension application is abandoned.

ATTACHMENTS

All supporting documents must be attached to the back of the application. Other letters or requests of any kind must be sent under separate cover.

PROOF OF ADMISSION (All Attorney Applicants)

Applicants must submit an original and current Certificate of Good Standing (CGS) as proof of admission from each US jurisdiction (except federal courts), and each foreign jurisdiction in which the applicant has been admitted. The CGS must be issued by the jurisdiction within six (6) months of the date the moral character application is filed in order to be considered current.

A CGS from each domestic and foreign jurisdiction must be filed with the initial moral character application and with each subsequent Application for Determination of Moral Character (determination application), and each Application for Extension of Determination of Moral Character (extension application). Domestic and foreign attorneys whose status is inactive must submit an original and current letter from the jurisdiction confirming no disciplinary action is pending or related to the “inactive” status. Submission of foreign-language documents must include a certified English translation.

DRIVER’S LICENSE

Applicants issued a driver’s license from an out-of-state or foreign jurisdiction must report the name of the issuing jurisdiction, license number, and submit an original, current and certified copy of the driving record from the jurisdiction(s). The driving record should include at least five (5) years of driving history (regardless of the number of years the applicant was licensed by the jurisdiction), and must be issued by the jurisdiction within six (6) months of the date the moral character application is filed. A driving record from the jurisdiction(s) must be filed with the initial moral character application and with each subsequent Application for Determination of Moral Character (determination application), and each Application for Extension of Determination of Moral Character (extension application). Submission of foreign-language documents must include a certified English translation.

APPLICATION UPDATING

Applicants for admission to practice law in California have a continuing duty to update responses to questions on the application whenever there is an addition to or change in information previously furnished. The applicant will not be eligible for certification until the application is current.

REFERENCES

Confidential Questionnaires and reference letters will be mailed by the Office of Admissions to references, employers and law schools listed on the application. In order to decrease the likelihood of a possible administrative delay in admission, all confidential questionnaires and reference letters must be returned to the Office of Admissions as soon as possible.

Please note: Contacting employers is part of the administrative screening process required of all applicants pursuant to Chapter 4 of the Admissions Rules. The application will not be accepted unless an applicant is willing to have his or her employers contacted.

APPLICATION ACKNOWLEDGMENT

Following receipt of an application, an email (or letter) will be sent to the address on record. An applicant who does not receive an acknowledgment notice within four weeks after submission of the application should contact the Office of Admissions.
WITHDRAWAL OF APPLICATION

Withdrawal of extension applications and requests for refunds received within 30 days after receipt of the application will be honored with a 60% refund of all fees paid in conjunction with the application.

An applicant may withdraw his or her application at any time prior to being notified that a determination of moral character cannot be made because of the need for further inquiry and analysis. An applicant may withdraw his or her application after receipt of such notice only with the consent of the Office of Admissions.

FINGERPRINTS

State law mandates that the State Bar of California "...require that an applicant for admission or reinstatement to the practice of law in California be fingerprinted in order to establish the identity of the applicant and in order to determine whether the applicant or member has a record of criminal conviction..." An extension application will not be considered complete without the appropriately processed fingerprints.

Live Scan Processing

Applicants who reside in California must submit fingerprints via Live Scan technology. Please see Fingerprint Instructions for California Residents below.

Fingerprint Card Processing

Applicants residing outside of the State of California must submit prints on fingerprint cards (FD-258) with a Request for Exemption from Mandatory Electronic Fingerprint Submission Requirement form. Please see Fingerprint Instructions for Out-of-State Residents.

An applicant’s fingerprints will be used solely to determine whether or not the applicant has a prior criminal record. The Committee will request that the criminal justice agencies return the fingerprints of all applicants and that the agencies neither copy the fingerprints nor disseminate them to others nor use them for any other purpose. Pursuant to Business and Professions Code Section 6054, the fingerprint cards of applicants who are admitted to practice law in California are retained for the limited purpose of criminal arrest notification.

Fingerprint Instructions for California Residents (Live Scan Technology)

Live Scan technology replaces the process of recording an individual’s fingerprints on fingerprint cards. With Live Scan, applicants must complete the Request for Live Scan Service form, a copy of which is on page 6 of these instructions, and take it to an agency that provides fingerprinting services. At the agency, a trained operator enters the information from the Request for Live Scan Service form into the Live Scan terminal and initiates the live scan fingerprinting process.

Applicants must print three (3) copies of the Request for Live Scan Service form. The three copies must be taken to an agency providing Live Scan services with a valid photo identification (expired photo identification cards will not be accepted). The Live Scan operator must complete the last section of the Request for Live Scan Service form on all three copies. The original copy is retained by the Live Scan operator, the second copy is attached to the completed Extension Application and the third copy is to be retained by the applicant. The list of agencies providing Live Scan fingerprinting services in California may be obtained through the Office of the Attorney General-California Department of Justice website (http://ag.ca.gov/fingerprints/publications/contact.htm).

If an applicant’s prints are rejected because of poor quality, the applicant will be asked to return to the original printing agency for re-printing. The applicant is to take his/her copy of the Request for Live Scan Service form and a copy of the rejection notice sent to him/her by the Admissions Office. The printing agency will scan new prints and forward them to the Department of Justice for processing. The “re-printing” service fee will be waived. Failure to provide the two stated documents will result in a service charge for re-printing.
Instructions for Completing the Request for Live Scan Service form

Note: The paper copy of your Moral Character Application must be received within 90 days of the date you complete the livescan process. Otherwise, your Application for Extension of Determination of Moral Character will be considered incomplete, and you will be required to complete the fingerprint process again.

1. **Name of Applicant:** Enter full name

2. **AKAs:** Enter any other names used

3. **Date of Birth:** Enter date of birth *(mm/dd/yyyy)*

4. **Sex:** Check appropriate gender box: Male or Female

5. **Height:** Enter height; Express in Feet and Inches respectively. (Do not use fractions of an inch; round off to the nearest inch. Examples: 5’11”, 6’0”)

6. **Weight:** Enter weight; Express in pounds. (Do not use fractions of a pound; round off to nearest pound. Examples: 94 lbs., 186 lbs.)

7. **Eye Color:** Enter eye color

   - Black – BLK
   - Green – GRN
   - Blue – BLU
   - Hazel – HAZ
   - Brown – BRN
   - Maroon – MAR
   - Gray – GRY
   - Pink – PNK

8. **Hair color:** Enter hair color

   - Bald – BAL
   - Gray or Partially – GRY
   - Black – BLK
   - Red or Auburn – RED
   - Blond or Strawberry – BLN
   - Sandy – SDY
   - Brown – BRN
   - White – WHI

9. **Place of Birth:** Enter city, state, and country.

10. **Social Security Number:** Enter social security number. If you do not have a social security number, leave space blank.

11. **California’s Driver License/Identification Card number:** Enter California Driver License/Identification Card number.

12. **Level of Service:** The DOJ box is pre-selected. Also, if you have lived outside of the state of California for a period of 2 years or more since age 21 you must select the FBI box as well.

13. **Applicant’s Address:** Enter residence address, city, state and zip code.

14. **Daytime Telephone Number:** Enter daytime telephone number.

15. **If resubmission: list Original ATI No.:** Enter the original ATI number provided on the reject notification to avoid paying an additional processing fee.
Fingerprint Instructions for Out of State Residents (Fingerprint Cards FD-258)

Effective July 1, 2005, the California Department of Justice only processes fingerprints through the Live Scan Fingerprinting System unless an exemption is granted. Since Live Scan Fingerprinting Agencies are only located in California, applicants who do not reside in California are required to submit, with their application, two fingerprint cards (on form FD-258) and a "Request for Exemption From Mandatory Electronic Fingerprint Submission Requirement" form, a copy of which is on page 8 of these instructions. At times, there are delays in processing fingerprint cards by criminal justice agencies or delays due to fingerprint card rejection by those agencies, for which the Office of Admissions does not accept responsibility. These delays may impact the time needed to process an Application. The fingerprints must be taken by a law enforcement agency (i.e. police department, sheriff's department, etc.) or by an agency that requires an applicant to provide appropriate identification. If the official taking the fingerprints has difficulty obtaining prints of acceptable quality because of the physical condition of the applicant's fingers (e.g., dermatitis, etc.), the official should be requested to explain (in writing) why the prints are of the best obtainable quality. That explanation should accompany the fingerprint cards. Fingerprints will be forwarded to the California Department of Justice and/or FBI for a record check.

To obtain fingerprint cards (FD-258), contact the Office of Admissions in Los Angeles (213) 765-1500, or San Francisco (415) 538-2300.

Applicants must complete identifying information required on the fingerprint cards using only the abbreviations listed below. Failure to provide all correct information will result in a delay in processing the application, along with the return of the fingerprint cards for completion.

<table>
<thead>
<tr>
<th>Eye Color</th>
<th>Hair color</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black – BLK</td>
<td>Bald – BAL</td>
</tr>
<tr>
<td>Green – GRN</td>
<td>Gray or Partially – GRY</td>
</tr>
<tr>
<td>Blue – BLU</td>
<td>Black – BLK</td>
</tr>
<tr>
<td>Hazel – HAZ</td>
<td>Red or Auburn – RED</td>
</tr>
<tr>
<td>Brown – BRN</td>
<td>Blond or Strawberry – BLN</td>
</tr>
<tr>
<td>Maroon – MAR</td>
<td>Sandy – SDY</td>
</tr>
<tr>
<td>Gray – GRY</td>
<td>Brown – BRN</td>
</tr>
<tr>
<td>Pink – PNK</td>
<td>White – WHI</td>
</tr>
</tbody>
</table>
## REQUEST FOR LIVE SCAN SERVICE

<table>
<thead>
<tr>
<th>ORI: A1104</th>
<th>Type of Applicant: License, Certificate or Permit</th>
</tr>
</thead>
<tbody>
<tr>
<td>STATE BAR LICENSE 6054 BPC</td>
<td></td>
</tr>
<tr>
<td>Job Title of License Certification or Permit: Attorney License</td>
<td></td>
</tr>
</tbody>
</table>

### Agency Address Set Contributing Agency:

State Bar of California License 6054 BPC  
Office of Admissions  
845 S Figueroa St  
Los Angeles CA 90017-2515  
Mailing Code: A05878

### Name of Applicant:

(please print)  
Last First MI

### AKAs:

Last First

### DOB:

SEX:  
☐ Male  ☐ Female

### HT:  WT:

Applicant's Address:

Street or P.O. Box  
City, State and Zip Code

### Eye Color:  Hair Color:

Place of Birth:

(state or foreign country)

### Social Security Number:

California Driver's License No.:  
Daytime Telephone Number

### Level of Service:

☐ DOJ  ☐ FBI  
Your Number: ____________________  
OCA No. (Agency Identifying No.)

(Only Check both boxes if you lived 2 years or more outside of CA since age 21)

If resubmission, list Original ATI No. ________________

### Employer:

(Additional response for agencies specified by statute)

State Bar of California  
Employer Name  
845 S Figueroa St  
Street No. Street or P.O. Box  
Los Angeles, CA 90017  
City State Zip Code

### Live Scan Transaction Completed By:

Name of Operator  
Date ____________

Transmitting Agency  
ATI No.  
Amount Collected

<table>
<thead>
<tr>
<th>Original-Live</th>
<th>Second Copy- Requesting Agency</th>
<th>Third Copy- Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>

WEIGHT (WGT)
Express in pounds. Do not use fractions; round off to the nearest pound. (Examples: 94 lbs. or 186 lbs.)

HEIGHT (HGT)
Express in feet and inches. Do not use fractions; round off to the nearest inch. (Examples: 5'11” or 6'0”)

SEX
Male  M
Female  F

The following questions are optional and do not require a response:
- Race
- Citizenship
- OCA Number
- FBI Number
- Armed Forces Number
- Miscellaneous Number

CHANGE OF ADDRESS
It is the applicant's responsibility to inform the Committee of any address changes. All correspondence will be mailed to the current mailing address on file. To change your address, email and/or telephone number, you must go online to http://admissions.calbar.ca.gov/ and log into your Admission Status Screen and select “Change My Profile.” Your contact information will be updated within 3 to 5 business days.

FURTHER COMMUNICATION
An official record of all communications is required; inquiries should be submitted in writing addressed to the Office of Admissions and sent to the appropriate address listed below. This will enable the staff to review your file prior to responding, and provide for precise rather than generalized responses. If your inquiry relates to a genuine emergency and requires immediate attention, the telephone numbers listed below are provided to assist you in such circumstances.

845 S. Figueroa Street
Los Angeles, CA  90017-2515

-or-

180 Howard Street
San Francisco, CA  94105-1639

<table>
<thead>
<tr>
<th>Los Angeles</th>
<th>San Francisco</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recorded General Information</td>
<td>(213) 765-1500</td>
</tr>
<tr>
<td>Applicant Services</td>
<td>(213) 765-1500</td>
</tr>
<tr>
<td>Forms/study aids requests</td>
<td>(213) 765-1520</td>
</tr>
<tr>
<td>Law Student/Attorney Registration</td>
<td>(213) 765-1500</td>
</tr>
<tr>
<td>Petitions</td>
<td>(213) 765-1500</td>
</tr>
</tbody>
</table>

The Office of Admissions is open for the transaction of business between the hours of 8:45 a.m. and 5:00 p.m., Monday through Friday, holidays excepted. Cash, cashier's checks, credit cards, travelers' checks and money orders will be accepted between 8:45 a.m. and 3:30 p.m. Personal checks will not be accepted.
REQUEST FOR EXEMPTION FROM
MANDATORY ELECTRONIC FINGERPRINT
SUBMISSION REQUIREMENT
BCII 9004 (3/05)

APPLICANT INSTRUCTIONS: Please type or print clearly all information. Illegible or incomplete information may result in processing delays or denial of your request. Enclose this form, and your two (2) fingerprint card(s) (FD258), with your application.

APPLICANT’S NAME: ____________________________

LAST _______ FIRST _______ MIDDLE _______

APPLICANT’S ADDRESS:

STREET: ____________________________

CITY: ____________________________ COUNTY: ____________________________ STATE: ____________________________ ZIP CODE: ____________________________

EMPLOYER OR LICENSING AGENCY:

________________________________________

BASIS FOR EXEMPTION:

1. NO REGIONAL ACCESS TO FINGERPRINTING SERVICES:

   Nearest Electronic Fingerprint Site: (Refer to public sites listed on the Attorney General’s website at http://ag.ca.gov/fingerprints/publications/contact.htm)

   BUSINESS NAME: ____________________________

   ADDRESS: ____________________________

2. OTHER (explain): ____________________________

   __________________________________________

   __________________________________________

   __________________________________________

Pursuant to California Penal Code section 11077.1(b), I request an exemption from the mandatory electronic fingerprint submission requirement. I certify that the foregoing is true and correct.

APPLICANT’S SIGNATURE: ____________________________

DATE: ____________________________

The Department of Justice will evaluate your request and determine whether adequate justification exists to accept your hard fingerprint card(s) in order to process a request for criminal offender record information for employment, licensing, certification, child placement, or adoption purposes.
IMPORTANT
Before mailing your application, please check the following:

- Is the correct fee included?

- Is the copy of Request for Live Scan Services form which has been completed by the live scan operator included? OR

  Are the two fingerprint cards and the Request for Exemption from Mandatory Electronic Fingerprint Submission Requirement form enclosed and completed in accordance with the instructions?

- Are all necessary attachments fastened to the application? The fingerprint cards and the Request for Exemption from Mandatory Electronic Fingerprint Submission Requirement form or Request for Live Scan form are considered part of the application and must be submitted with the application. Supporting documents other than these forms may be submitted separately.

- Is each question answered fully and completely?

- Is the application signed and currently dated?

- Are all applicable forms completed and attached?

- Are you mailing the application more than 30 days after you signed the declaration? The application must be received within 30 days of the date it is signed or it will be returned.
APPLICATION FOR EXTENSION OF DETERMINATION
OF MORAL CHARACTER

* NOTE *
Please carefully read the "Instructions for Applicants" before completing this application. All applicants are required to be familiar with and to comply with all such instructions. Applicants must answer every question. All pages of this application must be returned.
It is the duty of an attorney to do all of the following:

(a) To support the Constitution and laws of the United States and of this state.

(b) To maintain the respect due to the courts of justice and judicial officers.

(c) To counsel or maintain those actions, proceedings, or defenses only as appear to him or her legal or just, except the defense of a person charged with a public offense.

(d) To employ, for the purpose of maintaining the causes confided to him or her those means only as are consistent with truth, and never to seek to mislead the judge or any judicial officer by an artifice or false statement of fact or law.

(e) (1) To maintain inviolate the confidence, and at every peril to himself or herself to preserve the secrets, of his or her client.

(2) Notwithstanding paragraph (1), an attorney may, but is not required to, reveal confidential information relating to the representation of a client to the extent that the attorney reasonably believes the disclosure is necessary to prevent a criminal act that the attorney reasonably believes is likely to result in death of, or substantial bodily harm to, an individual.

(f) To advance no fact prejudicial to the honor or reputation of a party or witness, unless required by the justice of the cause with which he or she is charged.

(g) Not to encourage either the commencement or the continuance of an action or proceeding from any corrupt motive of passion or interest.

(h) Never to reject, for any consideration personal to himself or herself, the cause of the defenseless or the oppressed.

(i) To cooperate and participate in any disciplinary investigation or other regulatory or disciplinary proceeding pending against himself or herself. However, this subdivision shall not be construed to deprive an attorney of any privilege guaranteed by the Fifth Amendment to the Constitution of the United States, or any other constitutional or statutory privileges. This subdivision shall not be construed to require an attorney to cooperate with a request that requires him or her to waive any constitutional or statutory privilege or to comply with a request for information or other matters within an unreasonable period of time in light of the time constraints of the attorney's practice. Any exercise by an attorney of any constitutional or statutory privilege shall not be used against the attorney in a regulatory or disciplinary proceeding against him or her.

(j) To comply with the requirements of Section 6002.1.

(k) To comply with all conditions attached to any disciplinary probation, including a probation imposed with the concurrence of the attorney.

(l) To keep all agreements made in lieu of disciplinary prosecution with the agency charged with attorney discipline.

(m) To respond promptly to reasonable status inquiries of clients and to keep clients reasonably informed of significant developments in matters with regard to which the attorney has agreed to provide legal services.

(n) To provide copies to the client of certain documents under time limits and as prescribed in a rule of professional conduct which the board shall adopt.

(o) To report to the agency charged with attorney discipline, in writing, within 30 days of the time the attorney has knowledge of any of the following:

(1) The filing of three or more lawsuits in a 12-month period against the attorney for malpractice or other wrongful conduct committed in a professional capacity.

(2) The entry of judgment against the attorney in any civil action for fraud, misrepresentation, breach of fiduciary duty, or gross negligence committed in a professional capacity.

(3) The imposition of any judicial sanctions against the attorney, except for sanctions for failure to make discovery or monetary sanctions of less than one thousand dollars ($1,000).

(4) The bringing of an indictment or information charging a felony against the attorney.

(5) The conviction of the attorney, including any verdict of guilty, or plea of guilty or no contest, of any felony, or any misdemeanor committed in the course of the practice of law, or in any manner in which a client of the attorney was the victim, or a necessary element of which, as determined by the statutory or common law definition of the misdemeanor, involves improper conduct of an attorney, including dishonesty or other moral turpitude, or an attempt or a conspiracy or solicitation of another to commit a felony or any misdemeanor of that type.

(6) The imposition of discipline against the attorney by any professional or occupational disciplinary agency or licensing board, whether in California or elsewhere.

(7) Reversal of judgment in a proceeding based in whole or in part upon misconduct, grossly incompetent representation, or willful misrepresentation by an attorney.

(8) As used in this subdivision, "against the attorney" includes claims and proceedings against any firm of attorneys for the practice of law in which the attorney was a partner at the time of the conduct complained of and any law corporation in which the attorney was a shareholder at the time of the conduct complained of unless the matter has to the attorney’s knowledge already been reported by the law firm or corporation.

(9) The State Bar may develop a prescribed form for the making of reports required by this section, usage of which it may require by rule or regulation.

ATTORNEY’S OATH

I solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of California, and that I will faithfully discharge the duties of an attorney and counselor at law to the best of my knowledge and ability. As an officer of the court, I will strive to conduct myself at all times with dignity, courtesy and integrity.
APPLICATIONS MUST BE TYPEWRITTEN OR LEGIBLY PRINTED IN INK. STAPLE all attachments to the back of your application.

1.1 ADMISSIONS FILE #: ________________ (Required)

1.2 APPLICANT TYPE: (Please check one)  
☐ General Applicant (not admitted to practice law in another jurisdiction)

☐ Attorney Applicant (admitted to practice law in another jurisdiction AND in GOOD STANDING)

If disbarred or suspended, you are not eligible to file an Application for Extension of Determination of Moral Character. See Rule 4.41(A) of Title 4, Division 1, Chapter 4 of the Rules of the State Bar of California (Admissions Rules).

1.3 DATE OF BIRTH: ___________________________________ Month/Day/Year

1.4 APPLICANT’S FULL NAME:

Last __________ First __________ Middle __________

1.5 MAILING ADDRESS:

It is the applicant’s responsibility to inform the Committee of any address changes. All correspondence will be mailed to the current mailing address on file.

Full Street Address or P.O. Box (include apartment number, if applicable) ____________________________

Address Continued (if needed) ________________________________________________________________

U.S. City (or Non-U.S. City and Country) __________ State __________ Zip (U.S.) __________

1.6 DAYTIME TELEPHONE: ____________________________  
(Answering machines acceptable)

1.7 SPOUSE’S NAME: ____________________________ Prior to marriage, if different

1.8 DRIVER’S LICENSE NUMBER:

Do you have a California Driver’s License?  ☐ Yes  ☐ No

If yes, enter Driver’s License #: ____________________________

Were you ever issued an out-of-state and/or foreign driver’s license?  ☐ Yes  ☐ No

If yes, indicate state/foreign country, license number and provide an original, current and certified copy of your driving record from each out-of-state and foreign jurisdiction. ____________________________

1.9 APPLICATION FEE:

See instructions for proper application fee. Application will not be deemed filed unless the proper fee is enclosed.

$____________________ (TOTAL ENCLOSED)
General Instructions
The questions on the following pages were contained in your initial Application for Determination of Moral Character. They are repeated here to assist you with updating your application.

List only new incidents or cases in which there has been a change in status since your previously filed application. If you do not have anything to report, please so indicate. You must answer EVERY question, either by supplying new information or indicating that you have no new information to report.

NOTE: Applicants have a continuing duty to update in writing their responses to questions on the moral character section of the application (Section II) whenever there is an addition to or change in information to information that was previously furnished (Rule 4.42 of the Admissions Rules).

2.1 FORMER NAMES: Have you ever been known by any other names? ☐ YES ☐ NO

-> ☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

If YES, provide the effective dates and the reason for the change of name. If a change was made by court order, attach a copy to the application. If a change was made simply by assumption and use, please so state. If the change was made as part of a divorce proceeding, refer to Question 12.1 and be sure to complete FORM 1.

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Middle</th>
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<tr>
<td>Dates: From ___________________________ To ___________________________</td>
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<tr>
<td>Reason for change: ___________________________</td>
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</table>

2.2 LEGAL EDUCATION: Indicate all law schools attended since submitting your last application, even if you do not claim credit for the law study completed at each school. Include and distance learning study, correspondence study and law office study.

<table>
<thead>
<tr>
<th>Name and Location of School</th>
<th>Dates Attended From (Month/Year)</th>
<th>Dates Attended To (Month/Year)</th>
<th>Date of Graduation or Anticipated Graduation (Month/Year)</th>
<th>Degree or Units Completed</th>
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</table>

2.3 Are you currently a California Resident? ☐ YES(L) ☐ NO(C)

If yes, have you spent more than 24 months outside California since the age of 18? ☐ YES(F) ☐ NO(D)

2.4 RESIDENCE HISTORY: State the address of every residence (including the present) that you have had since you last filed an Application for Determination of Moral Character, commencing with your present address.

<table>
<thead>
<tr>
<th>Number &amp; Street Address</th>
<th>City and State</th>
<th>Zip Code</th>
<th>From Month/Year</th>
<th>To Month/Year</th>
</tr>
</thead>
<tbody>
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</table>

CHECK HERE ☐ IF CONTINUED ON ATTACHMENT
SELF-EMPLOYMENT
A RESPONSE IS REQUIRED TO BOTH QUESTIONS

List your current self-employment and each instance of self-employment since you last filed an application.

3.1 Have you ever been in business for yourself? (If YES, see below) □ YES □ NO

3.2 Have you ever been SELF-EMPLOYED as an attorney? (If YES, see below) □ YES □ NO

If YES to either of the above questions, please indicate both the name and address of the place of employment and the name and address of a person other than persons related to you by blood or marriage who can verify such employment.

BUSINESS/PRIVATE LAW PRACTICE

NAME OF BUSINESS ____________________________________________

MAILING ADDRESS ____________________________________________

MAILING ADDRESS (continued, if needed) ____________________________________________

CITY ____________________________ STATE ___________ ZIP ________________

BUSINESS PHONE ____________________________ FROM __________ TO __________

Month/Year       Month/Year

NATURE OF BUSINESS ____________________________________________

YOUR DUTIES ____________________________________________

VERIFYING REFERENCE FOR SELF-EMPLOYMENT

DO NOT LIST PERSONS LISTED AS EMPLOYMENT OR PERSONAL REFERENCES ON PAGES 4 AND 5 OR PERSONS RELATED TO YOU BY BLOOD OR MARRIAGE.

NAME OF REFERENCE ____________________________________________

MAILING ADDRESS ____________________________________________

MAILING ADDRESS Continued (if needed) ____________________________________________

CITY ____________________________ STATE ___________ ZIP ________________

OCCUPATION _______________ TELEPHONE _______________ LENGTH OF TIME KNOWN _____

CHECK HERE □ IF CONTINUED ON ATTACHMENT

3.3 If you have not been employed since you last filed an application, please explain to the best of your recollection where you were and what you were doing (e.g., 6/08 - 12/08 recuperated from major surgery at parents' house; 1/09 - 5/09 traveled [indicate country/region]; 12/09 - 2/10 studied for bar exam). Attach page(s) as necessary.
SECTION II
PROFESSIONAL REFERENCES

4.1 RE-ENTER FULL NAME

FILE #

EMPLOYMENT HISTORY

4.2 List your current employment and each instance of employment you have held since filing your last application. Indicate the reason for leaving if not currently employed. Use attachments as necessary.

NOTE: For periods of self-employment, complete page 3.

CURRENT EMPLOYMENT

NAME OF BUSINESS

SUPERVISOR

STREET ADDRESS

CITY    STATE    ZIP

BUSINESS PHONE: (________) ____________________ POSITION

FROM: ________/________
       Month Year

PREVIOUS EMPLOYMENT

NAME OF BUSINESS

SUPERVISOR

STREET ADDRESS

CITY    STATE    ZIP

BUSINESS PHONE: (______) ____________________ POSITION

LENGTH OF TIME EMPLOYED: From: ________/________ To: ________/________
       Month Year       Month Year

REASON FOR LEAVING

CHECK HERE □ IF CONTINUED ON ATTACHMENT

Include, for each position, all of the information requested above.
PERSONAL REFERENCES
THIS SECTION MUST BE COMPLETED BY ALL APPLICANTS

5.1 State the full names, complete addresses (including floor and/or suite numbers and ZIP CODES), and occupations of three reputable and responsible persons who know you well. AT LEAST ONE of these persons should be a member of the Bar of any U.S. or foreign jurisdiction and only one may be a law professor from whom you have received instruction.

* NOTE *

DO NOT INCLUDE persons who have only casual knowledge of you, persons related to you by blood or marriage, or persons listed as employment or verifying references on pages 3-4. List one address only for each reference. Please make certain that all addresses are current and complete.

<table>
<thead>
<tr>
<th>22</th>
<th>NAME OF REFERENCE</th>
<th>MAILING ADDRESS</th>
<th>MAILING ADDRESS (continued, if needed)</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
<th>OCCUPATION</th>
<th>PHONE</th>
<th>LENGTH OF TIME KNOWN</th>
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<tbody>
<tr>
<td>23</td>
<td>NAME OF REFERENCE</td>
<td>MAILING ADDRESS</td>
<td>MAILING ADDRESS (continued, if needed)</td>
<td>CITY</td>
<td>STATE</td>
<td>ZIP</td>
<td>OCCUPATION</td>
<td>PHONE</td>
<td>LENGTH OF TIME KNOWN</td>
</tr>
<tr>
<td>24</td>
<td>NAME OF REFERENCE</td>
<td>MAILING ADDRESS</td>
<td>MAILING ADDRESS (continued, if needed)</td>
<td>CITY</td>
<td>STATE</td>
<td>ZIP</td>
<td>OCCUPATION</td>
<td>PHONE</td>
<td>LENGTH OF TIME KNOWN</td>
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</table>

DO YOU CERTIFY THAT YOU ARE NOT RELATED TO THE ABOVE INDIVIDUALS BY BLOOD OR MARRIAGE (e.g., COUSIN, IN-LAW, SIBLING, PARENT OR SPOUSE)? ☐ YES ☐ NO
CREDENTIALS AND LICENSES

LIST ONLY NEW LICENSES OR LICENSES IN WHICH THERE HAS BEEN A CHANGE IN STATUS SINCE YOUR PREVIOUS APPLICATION. IF YOU DO NOT HAVE ANYTHING TO REPORT, PLEASE SO INDICATE.

☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

6.1 Have you ever applied for (or applied for and then withdrew an application) or held a license for a business, trade, or profession, other than as an attorney at law, the procurement of which required proof of good character and/or examination (e.g., certified public accountant, patent practitioner, or real estate broker)?

☐ YES  ☐ NO

If YES, provide the following information about each license.

ISSUING AUTHORITY ______________________________________________

MAILING ADDRESS ______________________________________________

MAILING ADDRESS (continued, if needed) ________________________________

CITY __________________________ STATE _________ ZIP _________

LICENSED or CERTIFIED AS _________________________________________

DATES: From _______/_______ To: _______/_______

Month Year Month Year

LICENSE OR CERTIFICATION # _____________________________ Inactive ☐  Active ☐

CHECK HERE ☐ IF CONTINUED ON ATTACHMENT.

OFFICE USE ONLY

Data Entry Completed ☐ __________________________

Initials & Date
COMPLAINTS; PROFESSIONAL DISCIPLINE

A response is required even if you answered NO or NOTHING NEW TO REPORT to Question 6.1.

LIST ONLY NEW INCIDENTS OR INCIDENTS IN WHICH THERE HAS BEEN A CHANGE IN STATUS SINCE YOUR PREVIOUS APPLICATION. IF YOU DO NOT HAVE ANYTHING TO REPORT, PLEASE SO INDICATE.

→ □ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

7.1 A. Have you ever been denied a business, trade or professional license? □ YES □ NO
   If YES, complete "D" below

B. Have you ever been disbarred, suspended, censured, or otherwise disqualified or had your license revoked as a member of any business, trade, or profession (e.g., attorney, certified public accountant, real estate broker, physician, etc.), or as a holder of public office? □ YES □ NO

C. To the best of your knowledge, have there ever been, or are there now pending, any charges, complaints, or grievances (formal or informal) concerning your conduct as a member of any business, trade, or profession, or as a holder of public office? □ YES □ NO

NOTE: If you answered YES to either A, B, or C, please fully explain the circumstances of each incident of denial, disbarment, suspension, censure, reprimand, complaint, grievance, etc., on a separate piece of paper and attach to the application.

D. Name and address of the authority in possession of the records regarding the disqualification or denial:
   NAME __________________________________________
   ADDRESS __________________________________________
   CITY __________________________ STATE __________ ZIP __________
   NAME OF COURT __________________________ DATE ADMITTED __________
   ADDRESS __________________________________________
   CITY __________________________ STATE __________ ZIP __________
   NATURE OF DISQUALIFICATION __________________________________________
   DISQUALIFICATION DATES: From _____/______ To: _____/______
   DATE OF DENIAL (Month/Year) __________________________
   Reason for disqualification: __________________________________________

E. Name and address of authority in possession of the records regarding the charge, complaint, or grievance:
   NAME __________________________________________
   ADDRESS __________________________________________
   CITY __________________________ STATE __________ ZIP __________
   NAME OF COURT __________________________ DATE ADMITTED __________
   ADDRESS __________________________________________
   CITY __________________________ STATE __________ ZIP __________
   DATE OF CHARGE __________________________ FINAL DISPOSITION __________________________
If your answer to any of the following needs more space, please attach a separate piece of paper.

A response to Questions 8.1 A & B is required even if you answered NO or NOTHING NEW TO REPORT to Question 6.1.

8.1 A. Have you ever resigned your business, trade, or professional license while charges were ending? If YES, please explain

☐ YES  ☐ NO

→ ☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

B. Have you ever permitted a business, trade, or professional license to expire?

If YES, please explain

☐ YES  ☐ NO

→ ☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

PRIOR APPLICATIONS FOR ADMISSION TO PRACTICE LAW

LIST ONLY NEW APPLICATIONS OR APPLICATIONS IN WHICH THERE HAS BEEN A CHANGE IN STATUS SINCE YOUR PREVIOUS CALIFORNIA APPLICATION. IF YOU DO NOT HAVE ANYTHING TO REPORT, PLEASE SO INDICATE.

* NOTE *

Applications for admission to practice law include, but are not limited to, applications to be admitted by examination, on motion, or on a diploma privilege, applications for reinstatement to the bar, and applications for a determination of moral character. Include every such application even if that application was subsequently withdrawn. For each application, indicate the nature of the application (e.g., examination, moral character, comity), the date it was submitted, and its ultimate disposition (e.g., admitted to practice law, withdrew application, denied).

8.2 Have you ever submitted an application for admission to practice law in any state or foreign country?

☐ YES  ☐ NO

8.3 If you are admitted to practice law elsewhere, are you in good standing in your jurisdiction(s)?

☐ YES  ☐ NO

NOTE: A CERTIFICATE OF GOOD STANDING FOR EACH JURISDICTION INTO WHICH YOU HAVE BEEN ADMITTED TO PRACTICE LAW MUST BE SUBMITTED WITH EACH APPLICATION.

If you are suspended or disbarred from practice as a result of a disciplinary proceeding, you are not eligible to file an Application for Extension of Determination of Moral Character (Rule 4.41(A) of the Admissions Rules).

State or foreign country _________________________________

Applied for admission (Month/year) _______________________

Date of examination that you took (Month/Year) _____________

Admitted or readmitted (Month/Day/Year) ___________________

Not admitted because (check one)

☐ Failed examination

☐ Withdrew application*

☐ Other reason*

* For any withdrawals and for any other reason for not being admitted which were not due to being unsuccessful on an examination, attach a separate piece of paper stating the question and detailing the circumstances and reasons.

→ ☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT
**CONVICTIONS**

The applicant has a continuing duty to update *in writing* responses to questions under the moral character section of the application whenever there is an addition to or change in information previously furnished (Rule 4.42 of the Admissions Rules).

IN ANSWERING THE FOLLOWING QUESTIONS, YOU SHOULD INCLUDE ALL SUCH INCIDENTS AND CONVICTIONS, NO MATTER HOW MINOR THE INCIDENT. Traffic violations which must be reported under this question include Failure to Appear, Driving Without a License, Driving with a Suspended License, and Reckless Driving, as well as all traffic violations that resulted in a misdemeanor or felony conviction.

YOU ARE EXCLUDED FROM ANSWERING QUESTIONS REGARDING THE FOLLOWING INCIDENTS:

A. Arrests that did not result in a conviction, unless you are awaiting final adjudication of the matter.

B. Any arrest, conviction or other proceeding the record of which has been ordered or is required to be sealed, obliterated, dismissed, or destroyed pursuant to Sections 851.7, 1203.4a*, 1203.45*, 1000 to 1000.11, 1001 to 1001.11, or 1001.20 to 1001.35 of the Penal Code of the State of California, or Section 781 of the Welfare and Institutions Code of the State of California, or Section 11361.5 of the Health and Safety Code of the State of California, or pursuant to a similar statute of another jurisdiction which provides in substance and effect that upon entry of an order, such arrest, conviction, or other proceeding shall be deemed not to have occurred or that the person to whom the proceeding relates, in answering any related question, may state it did not occur.

C. Any arrest, conviction or other proceeding, the record of which has been ordered or is required to be sealed, obliterated, dismissed, or destroyed pursuant to the statute of another jurisdiction, which statute provides in substance and effect that upon entry of an order, such arrest, conviction or other proceeding shall be deemed not to have occurred or that the person to whom the proceeding relates, in answering any related question, may state it did not occur. If you believe you come within this exclusion, you MUST include with your application a copy of the applicable statute and any supporting annotations and answer yes to question 9.5 below.

* NOTE *

The above-referenced sections of the Penal Code are Sections 1203.4a and 1203.45, not 1203.4. **SECTION 1203.4 (expungement) REQUIRES** disclosure of matters dismissed under that Section in response to a direct question contained in an application for licensure by a state agency.

LIST ONLY NEW INCIDENTS OR CASES IN WHICH THERE HAS BEEN A CHANGE IN STATUS SINCE YOUR PREVIOUS CALIFORNIA APPLICATION. IF YOU DO NOT HAVE ANYTHING TO REPORT, PLEASE SO INDICATE.

→ □ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

9.1 Have you ever been convicted of the violation of a misdemeanor or felony? As used herein, a conviction includes a plea of guilty or nolo contendere, or a verdict or finding of guilt, regardless of whether sentence is imposed by the court. □ YES □ NO*(2)

9.2 Are you awaiting final adjudication for any investigation or arrest? □ YES □ NO*(2)

9.3 Have you ever been held in contempt of court? □ YES □ NO*(2)

9.4 Have you ever been granted immunity in lieu of criminal prosecution? □ YES □ NO*(2)

If YES to any of the above questions, please complete FORM 2. Make as many COPIES as you need. Attach a copy of the police report, complaint, indictment, trial disposition, sentence, appeal, probation report and certified copy of conviction, if any.

9.5 Are you submitting a statute of another jurisdiction pursuant to Section "C" above? □ YES □ NO

A RESPONSE IS REQUIRED
SCHOLASTIC DISCIPLINE

LIST ONLY NEW INCIDENTS OR INCIDENTS IN WHICH THERE HAS BEEN A CHANGE IN STATUS SINCE YOUR PREVIOUS APPLICATION. IF YOU DO NOT HAVE ANYTHING TO REPORT, PLEASE SO INDICATE.

10.1 Have you ever BEEN FOUND TO HAVE VIOLATED A COLLEGE OR UNIVERSITY HONOR CODE OR been informally or formally dropped, suspended, warned, placed on disciplinary probation, expelled, or requested to resign or allowed to resign in lieu of discipline by any college or university (including law school), or otherwise subjected to discipline by any such institution or requested or advised by any such institution to discontinue your studies therein? □ YES □ NO

If YES, complete FORM 9 – Scholastic Discipline. Make as many COPIES as needed.

→ □ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

BONDEDNESS; DISCHARGE OF OBLIGATION; INDEBTEDNESS

LIST ONLY NEW MATTERS OR MATTERS IN WHICH THERE HAS BEEN A CHANGE IN STATUS SINCE YOUR PREVIOUS APPLICATION. IF YOU DO NOT HAVE ANYTHING TO REPORT, PLEASE SO INDICATE.

10.2 Have you ever held a bonded position? □ YES □ NO

If YES, specify the nature of the position, the inclusive dates, amount of bond, and whether any attempt has been made to recover upon your bond or cancel it.

→ □ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

10.3 Has a bond ever been refused where you were to be the bonded person? □ YES □ NO

If YES, provide the full details.

→ □ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

10.4 Are you in default in any way in the performance or discharge of any duty or obligation imposed upon you by decree, judgment, or order of any court or administrative agency, including alimony, support orders and decrees? □ YES □ NO

If YES, complete FORM 1.

→ □ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT
11.1 Do you owe any debts, including student loans, that are past due (include those barred by the statute of limitations and past due credit account balances)?

☐ YES ☐ NO

If YES, list each such indebtedness, providing the name and present address of the creditor, nature of the indebtedness, date incurred, the account number(s), amount still owing, and reason for nonpayment, and steps taken to address the debt.

→ ☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

11.2 Have you ever defaulted on any student loan?

☐ YES ☐ NO

If YES, list the name and address of the creditor or the guaranteeing agency to which the loan was sold or assigned, the loan account number, the amount owed and the steps taken to make the amount current.

→ ☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

BANKRUPTCY

LIST ONLY NEW CASES OR CASES IN WHICH THERE HAS BEEN A CHANGE IN STATUS SINCE YOUR PREVIOUS APPLICATION. IF YOU DO NOT HAVE ANYTHING TO REPORT, PLEASE SO INDICATE.

→ ☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

11.3 Have you ever been adjudicated a bankrupt?

☐ YES ☐ NO

11.4 Has a petition in bankruptcy (personal or business related) ever been filed by your or against you, either alone or in association with others?

If YES, complete FORM 3.

☐ YES ☐ NO

11.5 Do you have a bankruptcy pending under a Chapter 13 reorganization?

☐ YES ☐ NO

11.6 Have you ever been sued by a receiver, trustee, or other authority of any bankruptcy estate, for unlawful preference, conspiracy to conceal assets, or any other fraud or offense, whether or not punishable by law?

☐ YES ☐ NO

If YES, please state the date, title, and number of case, the name and location of the court in the space below, and continue on a separate piece of paper if needed. ATTACH to this application a copy of any complaint or other claim filed against you.
CIVIL ACTIONS AND ADMINISTRATIVE PROCEEDINGS

LIST ONLY NEW CASES OR CASES IN WHICH THERE HAS BEEN A CHANGE IN STATUS SINCE YOUR
PREVIOUS APPLICATION. IF YOU DO NOT HAVE ANYTHING TO REPORT, PLEASE SO INDICATE.

→ ☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

12.1 Have you ever been a party to or are you presently a party to any civil action or administrative proceeding (this
includes, but is not limited to, divorce, dissolution, small claims court proceedings, lawsuits, licensing or other
administrative proceedings, worker's compensation actions, etc.) ☐ YES ☐ NO

12.2 Has any company of which you are or were an officer, director or majority shareholder ever been a party to or
presently is a party to a civil action or administrative proceeding? ☐ YES ☐ NO

12.3 Have any judgments been filed against you? ☐ YES ☐ NO

If you answer YES to any of the above questions, complete FORM 1. Make as many copies of FORM 1 as you need.

FRAUD, MISREPRESENTATION, LEGAL MALPRACTICE

LIST ONLY NEW INCIDENTS OR CASES IN WHICH THERE HAS BEEN A CHANGE IN STATUS SINCE YOUR
PREVIOUS APPLICATION. IF YOU DO NOT HAVE ANYTHING TO REPORT, PLEASE SO INDICATE.

→ ☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

12.4 Have you ever had a complaint alleging fraud, deceit, misrepresentation, forgery, or legal malpractice filed and
sustained against you in any civil, criminal or administrative forum? This includes corporations of which you
were an officer or director and partnerships of which you were a member. ☐ YES ☐ NO

If YES, complete FORM 1 and ATTACH copies of the pleading, allegations and judgment.

ABILITY TO PRACTICE LAW

In answering Question 12.4, applicants should consider the following definitions for the words and phrases:

“Ability to practice law” includes performing services in a court of justice, in any manner, throughout its various stages
and in conformity with adopted rules of procedure. In a larger sense it includes providing legal advice and counsel and
preparation of legal instruments and contracts by which legal rights are protected. Law practice may also include the
resolution of legal questions for consumers by advice and action if difficult or doubtful legal questions are involved,
which, to safeguard the public, reasonably demand the application of a trained legal mind. These services must be
performed in accordance with the duties and ethical obligations of an attorney.

“Good moral character” includes qualities of honesty, fairness, candor, trustworthiness, observance of fiduciary
responsibility, respect for and obedience to the laws, and respect for the rights of others and the judicial process.

“Currently” does not mean on the day of, or even in the weeks or months preceding the completion of the application.
Rather, it means recently enough so that you believe that there is something that may have an ongoing impact on your
ability to be an attorney.

12.5 Is there any issue that would currently interfere with your ability to practice law in accordance with the duties
and ethical obligations of an attorney? ☐ YES ☐ NO

If YES, complete FORM 5 – Description of Issue Affecting Ability to Practice Law. Make as many copies
of Forms 5 as you need to describe the problem.

12.6 Are you currently the subject of a conservatorship? ☐ YES ☐ NO

If YES, complete FORM 8 – Subject of a Conservatorship.
MILITARY SERVICE

☐ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

13.1 Have you ever been a member of the armed forces of the United States, its reserve components or the National Guard?  ☐ YES  ☐ NO

If NO, proceed to the next page.

☐ I am presently a member of the armed forces. (Complete a. and b.)
☐ I was a member of the armed forces. (Complete a. and c.)

a. Branch of service

Regular armed forces:
☐ Air Force  ☐ Army  ☐ Coast Guard  ☐ Marine Corps  ☐ Navy

Reserve components:
☐ Air Force  ☐ Army  ☐ Coast Guard  ☐ Marine Corps  ☐ Navy

National Guard:
☐ Air Force  ☐ Army  ☐ Coast Guard  ☐ Marine Corps  ☐ Navy

My serial number was/is: ____________________________  My rank was/is: ____________________________

Dates of service: From (Month/Year) ____________________________  To (Month/Year) ____________________________

From (Month/Year) ____________________________  To (Month/Year) ____________________________

b. For ACTIVE AND RESERVE PERSONNEL ONLY: Check one: ☐ Active  ☐ Reserve

Present duty station __________________________________________

Address ________________________________________________

c. While a member of the armed forces of the United States:

Did you receive an honorable discharge?  ☐ YES  ☐ NO*

Were you ever court-martialed?  ☐ YES*  ☐ NO

Were you allowed to resign in lieu of court-martial?  ☐ YES*  ☐ NO

Were you administratively discharged?  ☐ YES*  ☐ NO

Were you ever awarded non-judicial punishment? (Article 15 UCMJ)  ☐ YES*  ☐ NO

* If you checked a box followed by an asterisk, on a separate sheet of paper provide a narrative explanation of the circumstances surrounding the occurrence.

If you are now separated from military service, attach a copy of DD Form 214 to the application. Make sure the copy includes your "Type of Separation" and "Character of Service." This form may be acquired by writing to Military Personnel Records Center, 9700 Page Blvd., St. Louis, MO 63132. You are required to furnish a DD Form 214 or other report of separation. If you are advised by the Military Personnel Records Center that no such document exists, attach a copy of that notification to this application.

NOTE: Acquiring the DD Form 214 or other report of separation from the Military Personnel Records Center can be a time-consuming process. A delay in receiving these papers by the State Bar’s Office of Admissions will delay the processing of your application.
CHEMICAL DEPENDENCY

LIST ONLY NEW INCIDENTS OR INCIDENTS IN WHICH THERE HAS BEEN A CHANGE IN STATUS SINCE YOUR PREVIOUS APPLICATION. IF YOU DO NOT HAVE ANYTHING TO REPORT, PLEASE SO INDICATE.

→  □ PLACE AN X HERE IF YOU HAVE NOTHING NEW TO REPORT

In answering Questions 14.1, applicants should consider the following definitions for the words and phrases:

“Ability to practice law” includes performing services in a court of justice, in any manner, throughout its various stages and in conformity with adopted rules of procedure. In a larger sense it includes providing legal advice and counsel and the preparation of legal instruments and contracts by which legal rights are protected. Law practice may also include the resolution of legal questions for consumers by advice and action if difficult or doubtful legal questions are involved, which, to safeguard the public, reasonably demand the application of a trained legal mind.

“Good moral character” includes qualities of honesty, fairness, candor, trustworthiness, observance of fiduciary responsibility, respect for and obedience to the laws of the state and the nation and respect for the rights of others and for the judicial process.

“Chemical dependency” is to be construed to include abuse and excessive use, addiction to alcohol, drugs or medications.

“Currently” does not mean on the day of, or even in the weeks or months preceding the completion of the application. Rather, it means recently enough so that you believe that the use of drugs or alcohol may have an ongoing impact on your functioning as an attorney.

14.1 Do you have any chemical dependency issues that would currently interfere with your ability to practice law?

□ YES  □ NO

If YES, complete FORMS 4 – Authorization to Release Medical Information and FORM 6 – Description of Chemical Dependency. Make as many COPIES of FORMS 4 and 6 as you need to describe the problem.
AUTHORIZATION AND RELEASE

IN RE APPLICATION OF

NAME:______________________________________________________________________

APPLICATION NUMBER:_______________________________________________________

I,_______________________________, hereby consent to the State Bar of California’s Committee of Bar Examiners conducting an investigation into my qualifications for good moral character. I have carefully read the questions in the foregoing application and have answered them truthfully, fully and completely, without mental reservations of any kind. I fully understand that failure to make a full disclosure of any fact or information called for may result in the denial of my application and receipt of an adverse moral character determination. I therefore expressly authorize the Committee of Bar Examiners, by and through its authorized agents or representatives (collectively, the “Committee”), to make inquiries and request information from third parties which, in the sole discretion of the Committee, is deemed necessary to determine my qualifications for good moral character. I understand that this Authorization and Release will remain effective throughout the entire moral character determination process, which includes proceedings before the State Bar Court and the California Supreme Court. I understand that I may withdraw this authorization at any time, and I acknowledge and agree that withdrawal of this Authorization and Release will terminate the moral character determination process.

I authorize and request every person, organization, association, firm, company, corporation, school, employer (past or present), bank, financial institution, franchise tax board, consumer or credit reporting agency, law enforcement agency, governmental agency or instrumentality, court, or any other third party (collectively, “Third Party”) having an opinion about me or knowledge or control of any documents, records, or data pertaining to me, including, but not limited to, any confidential or sealed records, public or private disciplinary records, or any criminal history record information (collectively, “Information”) to reveal, furnish, and release to the Committee any such Information. Records from financial institutions include, for example, bank statements and account information such as number of accounts and account balances. I further authorize and request any Third Party to answer any and all inquiries, questions, or interrogatories asked by the Committee concerning me or such Information about me and to appear before the Committee or the State Bar Court and give full and complete testimony concerning me or such Information about me.

Without limiting the previously described release, I specifically authorize the National Personnel Records Center, St. Louis, Missouri, or other custodian of my military records, to reveal, furnish, and release Information to the Committee from my military personnel file, including related medical records or a DD Form 214, Report of Separation, if any. I also specifically authorize the release of Information from other state bars, bar associations, or bar grievance councils regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent Information, as well as all undergraduate, graduate, or law school Information relating to my admission and my conduct during my enrollment in such schools. I further authorize all law schools, educational institutions and testing organizations to release to the Committee Information to be used in conjunction with studies conducted by the Committee regarding the admissions process.

I understand that the fact that I am a California applicant will be communicated to other bar admitting entities, as well as to the National Conference of Bar Examiners and by that agency to such other bar admitting authorities as may inquire, and I further authorize the Committee to release any Information received or obtained in connection with my moral character application to other bar admitting entities and the National Conference of Bar Examiners for purposes of other moral character investigations pertaining to me.

I hereby release, discharge, and exonerate the State Bar of California, including its Board of Trustees and the Committee, and all officers, employees, agents and representatives (as the same may be constituted from time to time) and any Third Party from and against any and all claims, demands, causes of action, damages, judgments, debts, obligations, or liabilities of every nature and kind arising out or in connection with any Information furnished to the Committee or used by the Committee pursuant to this Authorization and Release.

I also understand that pursuant to Rule 4.42 of the Admissions Rules, I am under a continuing obligation to keep my application current and must update in writing my response to the application whenever there is an addition to or a change to information previously furnished to the Committee.
For purposes of this Authorization and Release the undersigned gives permission to use a photocopy of his/her signature on this form as an original signature.

I hereby declare under penalty of perjury under the laws of the State of California that the answers and statements provided by me in the foregoing application are true and correct.

Executed on __________________________________________

(Date)

at ____________________________________________________

(City and State)

_____________________________________________________

(Print Name)

SIGN HERE ______________________________________________________

(Signature of Declarant)

Note: Applications received more than 30 days after being signed will be returned as stale dated.
IMPORTANT

Before mailing your application, please check the following:

☐ Is the correct fee included?
☐ Copy of “Request for Live Scan Service” form which has been completed by the live scan operator OR Fingerprint cards?
☐ If applicable, are the identification boxes on the fingerprint cards COMPLETED in accordance with the instructions?
☐ Is each question answered fully and completely?
☐ Is the application signed?
☐ Are you mailing the application more than 30 days after you signed the declaration?  The application must be received within 30 days of the date it is signed or it will be returned.
☐ Are all applicable forms completed and attached?

SEE SECTION REGARDING "COMPLETION OF APPLICATION" IN THE INSTRUCTIONS.

OFFICE USE ONLY

☐ Wrong Form
☐ Pencil
☐ Application Not Signed
☐ Fingerprints Missing
☐ Fingerprint Card Incomplete
☐ Declaration Altered
☐ Don't Contact Notation
☐ References
☐ Form 1
☐ Form 2
☐ Form 3
☐ Form 4
☐ Form 5
☐ Form 6

☐ Checklist Completed

__________________________
Initials and Date

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PAYMENT COUPON 5  Extension of Determination of Moral Character

Office of Admissions
The State Bar of California
845 S. Figueroa Street
Los Angeles, CA  90017-2515

Last Name     First Name    Middle Initial

___________________________
Application Fee:            $265.00
Admissions File Number

TOTAL PAID: ________________

Moral Character Extension
Payment Coupon

Rev. December 2016