I, _____________________________ am applying for admission to the Kentucky Bar. I am requesting that you type or print applicant's name. Complete this form on my behalf and mail to the address listed below. Your assistance is greatly appreciated.

Return completed form to: KENTUCKY OFFICE OF BAR ADMISSIONS
1510 NEWTOWN PIKE, SUITE 156
LEXINGTON, KY 40511-1255
(859) 246-2381

___________________________

To be completed by Judge or Clerk of Court (As an alternate, two statements of verification may be provided by a practicing attorney or supervising attorney):

I do hereby state that ___________________________ has actively practiced law in the Court or State of ___________________________ from ___________________________ to ___________________________. Said law practice was _______ Full time _______ Part time or non-traditional. (For part-time or non-traditional, information should be added to the "Remarks" below to indicate nature of practice and approximate percentage of time devoted to legal practice). To the best of my knowledge, the applicant is of sound moral character and fit to practice law in the Commonwealth of Kentucky.

Remarks:

___________________________

___________________________

Type or Print Name of Affiant's Name
Affiant's Signature
Date Signed

Type or Print Affiant's Title

Type or Print Affiant's Business or Firm Name

Address

City/State Zip Phone Number

STATE OF ___________________________
COUNTY OF ___________________________

Sworn to and subscribed to before me this day of ___________________________, 20__.

___________________________
Notary Public

___________________________
My Commission Expires