

OREGON STATE BAR BOARD OF BAR EXAMINERS

16037 SW UPPER BOONES FERRY RD, PO BOX 231935, TIGARD, OR 97281-1935

(503) 620-0222, EXTS. 310, 311, 316, AND 419

www.osbar.org/admissions

INSTRUCTIONS FOR FILING AN APPLICATION FOR RECIPROCAL ADMISSION (WEB VERSION)

- A. These instructions and forms are designed for those who wish to apply for admission by reciprocity (admission on motion) using the application forms obtained from the Admissions Department's web site.
1. **PLEASE READ ALL INSTRUCTIONS CAREFULLY AND THOROUGHLY BEFORE PROCEEDING.**
 2. The application forms contained on this web site are in writeable Portable Document Format (PDF). Therefore, your completed application must be **typewritten** and submitted in **hard copy form**. Please mail the completed forms, including payment, to the address at the top of this page. Applications submitted in electronic form **will not** be accepted or considered as correctly filed.
 3. Review the application, supplementary forms, and other contents contained within this PDF. A checklist has been provided to help aid in correctly completing and returning this application.
 4. Carefully read and adhere to the "General Instructions" set out on page 2 of the 15 page reciprocity application.
 5. All forms that need an applicant signature must first be printed and then signed by the applicant in blue or black ink.
 6. If you are a repeat applicant, please contact the Admissions Department at admissions@osbar.org to obtain a copy of your previous application. This information may help you with filling out the current application.

7. Complete and mail back two (2) copies of the Application Information Sheet. One will be returned to you as your receipt.
8. Complete and mail back six (6) character and fitness statements with the addresses of each of your current and previous five (5) employers. If you have no current employer please leave one form blank, or if you have not had a total of six (6) employers, please only fill-out the number of character and fitness statements that correspond with how many jobs you have held.

B. MINIMUM CONTINUING LEGAL EDUCATION CREDITS

You must complete 15 CLE credit hours within six months prior to six months after submitting your reciprocity application. A CLE itemization report is included in this application.

**For a current list of CLEs that meet reciprocal admission requirements please go to www.osbar.org/admissions and click on the “CLE Courses that Comply for Reciprocal Admission” link under the Reciprocity/Alternative Admission section.

***To obtain a pre-packaged Reciprocity DVD set, or make a purchase/rental of any of the CLE courses found on the above mentioned list please go to www.osbarcle.org or contact the CLE Service Center at 503-431-6413.

C. FILING DEADLINES

There is no filing deadline for reciprocity applications, but please be aware that at certain times of the year (specifically around the bar exam deadlines) there may be a slight delay in processing of the application.

D. APPLICATION FEES

Application fees must accompany the completed application forms. For applicants using the forms obtained from the web site an application kit was not pre-purchased and the fees are as follows:

Total reciprocity application fee is - \$850

** For further questions, please see RFA 4.10.

E. FILING OF APPLICATION

1. Send your completed application, fees, and supplementary documents to:

Oregon State Board of Bar Examiners
16037 SW Upper Boones Ferry Rd, PO Box 231935
Tigard, Oregon 97281-1935

2. An application missing the notarized affidavit, fingerprint card, and fees **will not** be considered correctly filed. Anything coming from a third party such as a Graduation Certificate, Good Standing Certificate, and Discipline Statement do not need to accompany the application to be considered filed.

Application Checklist ✓

Rule 15.05 - Reciprocity Admission

PAYMENT

<input type="checkbox"/>	\$850.00 total payment for PDF version of reciprocity application
<input type="checkbox"/>	Two copies of Application Information Sheet
<input type="checkbox"/>	One Completed Application (pages 1-14)
<input type="checkbox"/>	One Affidavit and Authorization (page 15 of the Application)
<input type="checkbox"/>	One Certificate of Graduation Form (completed and signed by your law school)
<input type="checkbox"/>	Enclosed
<input type="checkbox"/>	Will be Forwarded
<input type="checkbox"/>	Completed Fingerprint Card (reminder - top portion must be filled out and signed)
<input type="checkbox"/>	* One Certificate of Good Standing from each jurisdiction where you are admitted
<input type="checkbox"/>	Enclosed
<input type="checkbox"/>	Will Be Forwarded
<input type="checkbox"/>	* Separate disciplinary statement if good standing statement does not include required information. (See Rule For Admission 4.15(3)).
<input type="checkbox"/>	Enclosed
<input type="checkbox"/>	Will Be Forwarded
<input type="checkbox"/>	* Proof of Active Membership in a qualifying jurisdiction Note: This is usually combined with the Certificate of Good Standing.
<input type="checkbox"/>	Enclosed
<input type="checkbox"/>	Will Be Forwarded
<input type="checkbox"/>	* Proof of Passage of the Qualifying Jurisdiction's Bar Examination
<input type="checkbox"/>	Enclosed
<input type="checkbox"/>	Will Be Forwarded
<input type="checkbox"/>	Proof of lawfully engaging the practice of law for no less than five of the seven years immediately preceding filing of the application, or, if required by Rule 15.05 (9), active practice for no less than three out of the five years immediately preceding filing of the application. Note: The practice statement from page 14 question 25 of the reciprocity application will suffice.
<input type="checkbox"/>	Continuing Legal Education Compliance Form (Note: In order to qualify, the Course(s) must be taken up to six months BEFORE to six months AFTER the application is filed, but PRIOR to admission in Oregon.)
<input type="checkbox"/>	Will Be Forwarded
<input type="checkbox"/>	Character and Fitness Statements (top portion completed per instructions)
<input type="checkbox"/>	Request for Demographic Information (optional)
<input type="checkbox"/>	Professionalism Statement Form
<input type="checkbox"/>	Authorization Form (optional)

*Please contact the applicable bar association(s) and/or Supreme Courts for these items.

Please Return this Form with Completed Application

Application Information Sheet - Admission in Oregon

(Complete and return all copies with Application)

For Office Use Only

Admissions Filing Number _____

Reciprocity **In-House Counsel** **Law Teacher**

Rule 8.10 **Pro Bono**

Date Received (Filed) _____

Check Cash

Comments: (Check#: _____)

Funds Remitted By: _____

(RCT# _____)

Amount of Fees Attached \$ _____

Number: _____ - _____

APPLICABLE FEES

(PLEASE CHECK APPROPRIATE BOX(ES)) - SEE RULE 4.10 FOR FEE INFORMATION

DEADLINES:

FEBRUARY EXAM – 11/15 (TIMELY); 12/30 (LATE W/ADDITIONAL FEE)

JULY EXAM – 4/15 (TIMELY); 5/30 (LATE W/ADDITIONAL FEE)

Applicants who took but did not pass the February exam and desire to take the following July exam shall file an application not later than May 1 preceding the date of the July exam. No late filing fee will be assessed to these applicants if they file by this date.

Bar Examination Application

- 101-4070-000 Total Application Fee - if not admitted in any other jurisdiction(s) \$ 625.00
- 101-4320-000 Total Application Fee – if admitted in any other jurisdiction(s) \$ 850.00
- 101-4320-000 Application Fee – if admitted in any other jurisdiction(s) and re-applying within one year of last application (**See Rule 4.10(2) - Please read before paying**) \$ 800.00
- 101-4355-000 Late Filing Fee – **see deadline dates above** \$ 250.00
- 101-_____ Other _____ \$ _____

Reciprocity **In-House Counsel** **Law Teacher** **Rule 8.10** **Pro Bono**

- 101-4070-100 Alternative Admission Application Fee (**Reciprocity, House Counsel, and Law Teacher Admission**) \$ 850.00
- 101-4320-100 Rule 8.10 Investigation only fee (**for Rule 8.10 and Pro Bono Applicants**) \$ 225.00

Total Applicable Fees Remitted	\$
---------------------------------------	-----------

Please Complete Address Information - Please Press Firmly

_____ Name (First, Middle, Last)
_____ Mailing Address
_____ City, State, Zip Code

Application Information Sheet - Admission in Oregon

(Complete and return all copies with Application)

For Office Use Only

Admissions Filing Number _____
 Reciprocity **In-House Counsel** **Law Teacher**
 Rule 8.10 **Pro Bono**
Date Received (Filed) _____
 Check Cash
Comments: (Check#: _____)

Funds Remitted By: _____
(RCT# _____)
Amount of Fees Attached \$ _____
Number: _____ - _____

APPLICABLE FEES

(PLEASE CHECK APPROPRIATE BOX(ES)) - SEE RULE 4.10 FOR FEE INFORMATION

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- 101-4320-100 Rule 8.10 Investigation only fee (**for Rule 8.10 and Pro Bono Applicants**) \$ 225.00

Total Applicable Fees Remitted	\$
---------------------------------------	-----------

Please Complete Address Information - Please Press Firmly

_____ Name (First, Middle, Last)
_____ Mailing Address
_____ City, State, Zip Code

IN THE SUPREME COURT OF THE STATE OF OREGON

In The Matter of the Application of

(Please type your name as you wish it to appear on all bar correspondence)

For Admission to Practice Law in the State of Oregon

Application is being made for Admission under Rule 15.05 - Reciprocity Admission

- I hereby apply for admission as an active member of the Oregon State Bar and provide the following information in compliance with the Rules for Admission of Attorneys of the Supreme Court of the State of Oregon. I understand that the following answers and statements are submitted under oath and that failure to answer any item or to fully disclose any fact or information called for in this application, and accompanying forms, may result in the denial of my application for admission and/or in disciplinary action.
- I am an active member of the _____ Bar(s).
(Please see RFA 15.05(2) and the list of qualifying jurisdictions provided with application kit.)
- I have actively, substantially, and continuously engaged in the practice of law for no less than five of the seven years, or three out of five years if admitted in Alaska, Idaho, Utah, or Washington (please see RFA 15.05(9)) immediately preceding the filing of this application in
- Alaska
 - Idaho
 - Utah
 - Washington
 - Other (Please specify:_____)
- I am a graduate of a law school approved by the American Bar Association
- I took and passed the
- Alaska State Bar Exam
 - Idaho State Bar Exam
 - Utah State Bar Exam
 - Washington State Bar Exam
 - Other (Please specify:_____)

APPLICATION

GENERAL INSTRUCTIONS

- If space is insufficient for any answer, complete your answer on a separate sheet of paper and attach that sheet to this application
- Err on the side of over-disclosure
- Answer every question
- If a question is not applicable to you, answer the question "Not Applicable"
- Include **one (1)** notarized original of the Affidavit and Authorization Form (Page 15)
- Provide the **full** number, street name, city, state and zip code for each address. **P.O. Boxes will not be accepted.**
- If an answer to any question changes before your admission, you are obligated to update your application. (See #3 of Affidavit and Authorization Form (Page 15))
- Complete all the forms required
- Sign all the forms requiring your signature
- No exceptions to the filing deadlines will be granted
- If you withdraw by the deadline (Rule 4.10 regarding Withdrawal) you will receive a partial refund
- It is an applicant's duty to obtain and provide the information requested (Rule 4.25))

PART 1	Questions Applicable to ALL Applicants	
1	Full Legal Name: _____	Social Security Number: _____
2	Mailing Address: _____ _____ _____ _____	Phone Number: _____
	Second Address where you can be reached: _____ _____ _____ _____	Phone Number: _____
3	Email Address: _____	

4	Date of Birth:	Place of Birth:	<input type="checkbox"/> Male <input type="checkbox"/> Female
5	If you have ever been known by any other name, nickname or alias, provide that name and the reason(s) you used that name:		
6	List all residential addresses where you have lived for the past five years. (Attach additional sheet if necessary)		
Address, City, State, and Zip Code		Period of Residence	

7	Are you presently married? Yes <input type="checkbox"/> No <input type="checkbox"/>
8	If yes, provide date of marriage ___/___/___
9	Full name of Spouse _____
10	<p>Have you ever been divorced, separated or had a marriage annulled or set aside? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please provide court and case number: Court # _____ Case # _____</p>
11	<p>Have you ever been required to pay child support, alimony, or family support as a result of a divorce, annulment or other court proceeding? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please provide information regarding the support order, including the case number and court or administrative agency.</p>
12	<p>Are you currently in the armed forces? Yes <input type="checkbox"/> No <input type="checkbox"/> List which branch: _____</p> <p>Have you ever been a member of the armed forces? Yes <input type="checkbox"/> No <input type="checkbox"/> List which branch: _____</p> <p>If you are no longer a member of the armed forces, were you honorably discharged? Yes <input type="checkbox"/> No <input type="checkbox"/> (<i>please explain on a separate sheet</i>)</p>

13 List each jurisdiction that has ever issued you a driver's license. **You do not need to provide DMV records.** The Board of Bar Examiners will obtain your records. **If unable to locate old license numbers, at least include state and time period license was held.**

State (or country) issuing license	License #	Time period during which license was in effect

14 List every post-secondary educational institution (other than law school) you have attended:

Institution	Location	Period of Attendance	Degree Earned

15	List every law school you have attended:				
	Law School	Location	Period of Attendance	Date or Expected Date Of Graduation	Day or Evening Student

16	If this is not your first application for admission in Oregon, give the date of each previous application, the reason(s) why you were not then admitted and, if an application was withdrawn, the reason(s) for the withdrawal:	
	Month and year of Examination And/or Other Type of Application	Reason Not Admitted/Reason Withdrawn

17	Specify each application you have made to practice law in any jurisdiction (other than Oregon):				
	Application By:	State or Country	Date Applied	Date of Admission	If Not Admitted, State the Reason(s)
	<input type="checkbox"/> Examination <input type="checkbox"/> Reciprocity <input type="checkbox"/> On Motion <input type="checkbox"/> Other				
	<input type="checkbox"/> Examination <input type="checkbox"/> Reciprocity <input type="checkbox"/> On Motion <input type="checkbox"/> Other				
	<input type="checkbox"/> Examination <input type="checkbox"/> Reciprocity <input type="checkbox"/> On Motion <input type="checkbox"/> Other				
	<input type="checkbox"/> Examination <input type="checkbox"/> Reciprocity <input type="checkbox"/> On Motion <input type="checkbox"/> Other				
18	If, in connection with any application you made for admission to practice law in any other state, territory or country you were requested to give any information regarding character and fitness beyond completing that jurisdiction's standard application for admission, explain what occurred:				
19	Have you ever previously been admitted to practice law in Oregon under any other rule, such as House Counsel or Law Teacher? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide your Bar #: _____				

<p>20</p>	<p>List your current and previous five employers and state the dates you were employed by them. Include intern/externships and volunteer work. List your supervisor, if applicable, and indicate if that person is no longer employed there. Provide the full and correct name, address, city, state and zip code for each address. <i>If a company is no longer in business, indicate so, next to its last known address:</i></p>	
<p>Name and Complete Address:</p>	<p>Occupation / Position: Period of Employment: Reason for Leaving:</p>	
<p>Name and Complete Address:</p>	<p>Occupation / Position: Period of Employment: Reason for Leaving:</p>	
<p>Name and Complete Address:</p>	<p>Occupation / Position: Period of Employment: Reason for Leaving:</p>	
<p>Name and Complete Address:</p>	<p>Occupation / Position: Period of Employment: Reason for Leaving:</p>	
<p>Name and Complete Address:</p>	<p>Occupation / Position: Period of Employment: Reason for Leaving:</p>	
<p>Name and Complete Address:</p>	<p>Occupation / Position: Period of Employment: Reason for Leaving:</p>	

21 List **five (5) responsible people** who are in a position to attest to your character and fitness to practice law. There are no statements for these references. **The Board of Bar examiners will contact these references as needed.**

(1) Your acquaintance with the people listed should be more than casual and of substantial duration.

(3) Do not list any former supervisors listed in Question 20 unless the supervisor is no longer working at that place of employment.

(4) Do not list any Justice of the Oregon Supreme Court.

Name and Complete Address:

Phone #:

Email:

Nature and Length of Acquaintance:

Name and Complete Address:

Phone #:

Email:

Nature and Length of Acquaintance:

Name and Complete Address:

Phone #:

Email:

Nature and Length of Acquaintance:

Name and Complete Address:

Phone #:

Email:

Nature and Length of Acquaintance:

Name and Complete Address:

Phone #:

Email:

Nature and Length of Acquaintance:

22	<p>If your answer to any of the portions of this question is "YES," attach a separate sheet of paper with a detailed explanation of the circumstances that required you give an affirmative answer to that portion of the question. If the information you provide is not sufficiently complete and detailed, your application will be delayed until you provide the necessary additional information. If your explanation refers to a court case or administrative proceeding, give the number and sufficient information so that the Board of Bar Examiners can locate the record:</p>		
	<p>a. Have you ever been dropped, suspended, expelled, disciplined or subjected to a disciplinary inquiry or proceeding by any college or law school for any cause whatsoever?</p>	YES	NO
	<p>b. Have you ever been discharged or asked to resign from employment? If yes, explain and provide the date, circumstances, and name, address, phone number and email address of employer, as well as the name and title of individual making such request if other than the listed employer (attach supplemental sheet)</p>		
	<p>c. Have you ever been a party to any civil proceeding, including any bankruptcy or administrative proceeding?</p>		
	<p>d. Have you ever been charged with fraud or dishonesty in any civil proceeding?</p>		
	<p>e. Have you had more than five checks dishonored because of insufficient funds during the past three years?</p>		
	<p>f. Have you ever had a check for more than \$100 dishonored because of insufficient funds?</p>		
	<p>g. Do you now have any loans, accounts, judgments or financial obligations of any nature, including child support payments and student loans, past due for payment more than 60 days?</p>		
	<p>h. Has any surety on any bond on which you were the principal or obligor been required to pay any money on your behalf?</p>		
	<p>i. Have you ever been denied a bond, had a bond revoked, or had anyone seek to recover upon or cancel a bond?</p>		
	<p>j. Have you ever been arrested, charged with or convicted of any criminal offense? If yes, complete the information below. For purposes of this question, you must list any criminal offenses, even if the offense was subsequently expunged or set aside. You may only omit juvenile matters which were expunged or set aside.</p>		

Complete one line for each citation, charge, arrest or conviction, whether stemming from the same facts or not. Continue on an additional sheet, if necessary, and attach relevant documentation.

	Date	Location of Incident	Court	Basic allegation of charges	Disposition
EXAMPLE	12/19/92	Portland, OR	Multnomah Cty	DUI	Dismissed
1.					
2.					
3.					
4.					
5.					
6.					
7.					

22 — Continued

		YES	NO
	k. Have you ever been charged with contempt of court?		
	l. Have you ever been accused of dishonesty in connection with employment?		
	m. Have you ever applied for a license, other than as an attorney at law, the procurement of which required proof of "good moral character" (i.e., CPA, patent agent, notary public, real estate broker, physician, nurse)?		
	n. Has any proceeding ever been instituted to declare you an incompetent person, an insane person or a mentally diseased person?		
	o. Have you ever had a dependency upon, undergone treatment for, or been discharged from employment for the use of a controlled substance or alcohol?		
	p. Do you currently have any condition or impairment (including, but not limited to, substance abuse, alcohol abuse, or a mental, emotional or nervous disorder or condition) that in any way currently affects, or if untreated could affect, your ability to practice law in a competent and professional manner? ("Currently" means recently enough so that the condition could reasonably have an impact on your ability to function as a lawyer.)		

	<p>q. Have you ever been treated for any mental or emotional condition which, if active or untreated, could affect your ability to practice law in a competent and professional manner?</p>		
	<p>r. If your answer to (p) or (q) is affirmative, are the limitations or impairments caused by your mental health condition or substance abuse problem reduced or ameliorated because you receive ongoing treatment (with or without medication) or because you participate in a monitoring program?</p>		
	<p>s. Have you or anyone you have worked with ever been charged with the unauthorized practice of law?</p>		
	<p>t. Have you or anyone you have worked with ever been sanctioned, censured, reprimanded, disciplined, suspended, disqualified or disbarred as a member of any profession or as a practitioner before any administrative agency?</p>		
	<p>u. Have you ever been suspended or removed from public office because of conduct reflecting adversely upon your character?</p>		
	<p>v. Have you ever been subject to any disciplinary action in connection with military service?</p>		
	<p>w. Has anyone to your knowledge, ever complained to your law school or other supervising body in connection with your conduct under a student practice or legal intern rule?</p>		
	<p>x. Is there any additional information with respect to possible misconduct or lack of moral qualification or general fitness on your part that is not otherwise disclosed by your answers to questions in this application? If yes, explain</p>		

PART 2

Information to be Submitted by ALL Applicants

- 23** The following information should be obtained and submitted with your application if possible. Submitting these items after your application could result in the delay of your admission:
- a. One fingerprint card
 - b. One certificate of graduation issued by your law school verifying that the law school is approved by the American Bar Association and that you earned a Juris Doctor degree or equivalent
 - c. Certification of passage of the qualifying jurisdiction's bar examination
 - d. With respect to each jurisdiction in which you have been admitted, a certificate of good standing by the bar association of that jurisdiction (or, if the jurisdiction does not have an integrated bar association, the highest court of that jurisdiction) showing the date of your admission, that you are a member in good standing, entitled to engage in the practice of law and that there is not now pending, or has there even been any complaint or disciplinary proceeding against you, except as stated and, if any appear, the status thereof, the nature of the charge(s), the disposition thereof, and sufficient information to enable the Board of Bar Examiners to locate the record.

PART 3

Questions applicable only to applicants who have been admitted to practice law in another state or country

24 List the jurisdictions in which you have been admitted to practice law, the date you were admitted and your bar number:

Jurisdiction	Date of Admission (M/D/Y)	Bar Number

<p>25</p>	<p>Having been actively engaged in the practice of law, attach a statement describing your practice since first being admitted in any jurisdiction, include in the statement part-time or temporary work and show, in each instance:</p> <ol style="list-style-type: none"> a. The dates between which you were actively engaged in the practice of law; b. The addresses of the offices or places at which you were so engaged; c. The names and addresses of former employers, partners, associates and subordinates with whom you had regular contact; d. The nature and extent of your practice, and; e. The reason for the termination of each such employment, partnership, association, relationship or period of practice.
<p>26</p>	<p>If anyone has ever complained to any bar association, court or administrative office about your professional services or conduct, state the facts fully, identifying the client, the approximate date the complaint was made, the bar association, judge or office to which it was made and the disposition made of the complaint. Attach an additional sheet if necessary.</p>
<p>27</p>	<p>If you have ever been the subject of any disciplinary proceeding in connection with your practice of law in any jurisdiction, or have ever received a warning, reprimand or sanction concerning your practice, state the facts fully, identifying the nature of the alleged violation, the disposition of the matter and the name and address of the person or entity who would have the record.</p>
<p>28</p>	<p>The following information must be submitted from each jurisdiction where you have been admitted, prior to your taking the Oath of Office to practice law in Oregon:</p> <p>Please note that some jurisdictions combine these two documents:</p> <ol style="list-style-type: none"> 1. A Status Certificate or Good Standing Statement, showing your date of admission and your current status in that jurisdiction (Active, Inactive, Suspended, etc.). 2. A Discipline Statement, indicating whether there is now pending, or if there has ever been, any complaint or disciplinary proceeding against you, and if any appear, the status thereof, the nature of the charge(s) and the disposition thereof. 3. If admitted in Oregon via House Counsel or Law Teacher, please obtain Good Standing and Discipline statements from the Regulatory Services & Discipline Department at the Oregon State Bar. <ul style="list-style-type: none"> • Please restate your bar # _____

All Applicants MUST complete the following:

AFFIDAVIT AND AUTHORIZATION

STATE OF _____)

COUNTY OF _____)

I, _____ being duly sworn, state that:

1. I am the applicant named in the foregoing application for admission to practice law in Oregon;
2. I have read the Rules of the Supreme Court of the State of Oregon relating to admission to practice law in Oregon, and I make this application in accordance with those rules;
3. I understand that my obligation to furnish complete and accurate information in connection with this application is a continuing one and, accordingly, should anything occur or be discovered between the time this application is submitted and the time I am admitted that would change or render incomplete any portion of the information furnished in or in connection with this application, I will promptly notify the Board of Bar Examiners and furnish the necessary information to correct or complete my application;
4. I agree to give any further information which may be required in reference to my past record;
5. I hereby authorize the Supreme Court of the State of Oregon and the Board of Bar Examiners, or their agents or authorized representatives, to make a complete investigation of my character, financial responsibility and general fitness to practice law in Oregon and to disclose such information about me as may be reasonably necessary to conduct such an investigation;
6. I hereby authorize every person, firm, company, corporation, governmental agency, court, association, bar admissions or discipline authority, or educational or other institution, including, without limitation, colleges, universities, and law schools, having control of documents relating to me, including, without limitation, driving records, post-secondary educational institution and law school records, military records, credit reports, litigation records, professional disciplinary records, and employment records, to provide that information and those documents to the Supreme Court of the State of Oregon and the Board of Bar Examiners and their agents or authorized representatives;
7. To investigate and reach a determination respecting my moral character, reputation, fitness for the practice of law, I hereby release, discharge and exonerate the Oregon Board of Bar Examiners, their members, agents and representatives and any person, entity furnishing documents, records or other organization supplying requested information in connection with this application or the investigation discussed above from any and all liability of every nature and kind arising from any investigation or out of the furnishing, inspection or use of such documents, records and other information; and
8. I understand, subject to the exceptions in the Rules for Admission, and agree, and as noted in this application, or as required by law, that all documents, records and other information pertaining to me, furnished to the Oregon State Board of Bar Examiners in connection with this application are privileged and confidential and will not be disclosed to persons outside the Supreme Court of Oregon and the Board of Bar Examiners and their agents or authorized representatives without my prior consent and that this application is and shall remain the property of the Supreme Court.
9. I fully realize that the determination of whether I may be allowed to practice law in Oregon depends on the truth and completeness of my answers in this application and the information furnished with it;
10. I have read the foregoing application and the answers that I have given in it are true and complete.

_____(Applicant)

Subscribed and sworn to before me this _____ day of _____

* _____

Notary Public For: _____

My Commission Expires: _____

***Note: Each copy of this application must be separately signed by the applicant and separately notarized. The signatures may not be carbon or photocopied signatures.**



Oregon State
Board of
Bar Examiners

OREGON STATE BOARD OF BAR EXAMINERS

16037 SW Upper Boones Ferry Road, Tigard, OR 97224
Inside Oregon: 1-800-452-8260 - (503) 620-0222, Exts. 310, 311, 316 and 419

www.osbar.org

To: All Reciprocity Applicants for Admission to Practice Law in Oregon
From: Oregon State Board of Bar Examiners
Re: Character and Fitness Statements

Enclosed you will find six (6) Employment Character and Fitness Statements. Complete the top part of each form ONLY with:

- Your name on the line below the words "**In the Matter of the Application of**"
- The name and complete address of each of your places of employment. Refer to page 8 of the bar exam application in response to question 20. ***(Please type within the guide marks [shaded area within the brackets], as these statements will be mailed in window envelopes.)***
- The name of your supervisor if that person is still employed by that company. If not, please address the reference to HR or Personnel Department
- Dates of employment, where applicable

We will mail the forms to your references.

**DO NOT MAIL OR GIVE THESE STATEMENTS
TO YOUR REFERENCES –
INCLUDE THE STATEMENTS WITH YOUR
APPLICATION**

**IN THE SUPREME COURT OF THE STATE OF OREGON
EMPLOYMENT CHARACTER AND FITNESS STATEMENT**

****Employer References – Please answer the questions below and mail back in the return envelope provided. If unable to complete this form, please make a note of this and return the form anyway.****

In the Matter of the Application of:

_____ (PRINT TYPE YOUR NAME HERE)

[]
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Employed from: _____ **to** _____
Supervisor: _____

1. My name is: _____ 2. My occupation is: _____
2. I am a member in good standing of the Bar of : *(if none, write none)*
3. I have been acquainted with the applicant for _____ years under the following circumstances:
4. Do you believe the applicant to be trustworthy? **YES** **NO**
(If you answer NO, provide a short summary of details)
5. Please check yes or no. If your answer to any is YES, provide a short summary. To your knowledge has the applicant:
 YES **NO** been accused of a violation of the honor code or student conduct code, warned, placed on scholastic or disciplinary probation, suspended, requested or advised to discontinue studies, dropped, expelled, or requested to resign or otherwise subject to discipline for academic or personal conduct reasons by any educational institution?
 YES **NO** been a party to legal or administrative proceedings?
 YES **NO** been charged with, arrested for or convicted of any traffic or criminal offense?
 YES **NO** been accused of a violation of trust?
 YES **NO** been denied admission to the Bar of any other state?
 YES **NO** had a pattern of unexcused absences from school or work?
 YES **NO** demonstrated violent or disruptive behavior?
 YES **NO** been addicted to or dependent upon the use of narcotics, drugs or intoxicating beverages within the past 10 years?
 YES **NO** been hospitalized during the past 10 years for treatment of any of the following: schizophrenia or other psychotic disorder; bipolar or major depressive mood disorder; drug or alcohol abuse; impulse control disorder, including kleptomania, pyromania, explosive disorder, pathological or compulsive gambling; or paraphilia such as pedophilia, exhibitionism or voyeurism that could impair or limit the ability to practice law in a competent and professional manner?
 YES **NO** had a mental health condition that currently impairs or limits, or if left untreated could impair or limit, the ability to practice law in a competent and professional manner?
 YES **NO** been delinquent in any financial obligations?
6. I am _____ / I am not _____ able to give factual, accurate, and reliable appraisal of the applicant's moral character and general fitness to practice law. If not, why not?
7. I believe: **(check one)**
 The applicant is qualified by general fitness and good moral character to practice law and I make this statement without reservation.
 The applicant is qualified by general fitness and good moral character to practice law, but I am aware of facts set forth concerning the applicant's background, history, experience, or activities which may have a bearing on this question and should be brought to the attention of the examining authorities.
 The applicant is not qualified to practice law for the reasons set forth (attach a separate sheet)

Signature: _____ **Date:** _____

**IN THE SUPREME COURT OF THE STATE OF OREGON
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Signature: _____ **Date:** _____

Oregon State Board of Bar Examiners
P. O. Box 231935, Tigard, Oregon 97281-1935

MCLE ITEMIZATION REPORT FORM FOR RECIPROCITY APPLICANTS

CLE credits may ONLY be claimed for any activity that has been accredited by the Oregon State Bar Minimum Continuing Legal Education Administrator

To satisfy the reciprocity application requirements, applicants must take 13 hours of General Credits and **2 Hours of Ethics Credits (15 total)**. Of the General Credits, at least **4 Hours** must be focused on **Oregon Civil Procedure and Practice**.

Find a complete listing of eligible programs that comply for reciprocal admission follow this link www.osbar.org/admissions and go to the Reciprocity/Alternative Admission Section. Additional information on CLEs can be found at www.osbarcle.org

Applicant's Name: Joe Law EXAMPLE						
Program Number	Program Title (Name)	Sponsor Name	Date Individually Screened	Ethics	Oregon Civil Procedure & Practice	Other General credits
1*1700	RECIPROCITY CLE DVD SET	Oregon State Bar	1/1/2010	2	4	9

Applicant's Name:						
Program Number	Program Title (Name)	Sponsor Name	Date Individually Screened	Ethics	Oregon Civil Procedure & Practice	Other General Credits

(use a second sheet to list additional programs)

I hereby certify that the information included above is complete and accurate _____(signature)

_____(print name)



Oregon State
Board of
Bar Examiners

IN THE SUPREME COURT OF THE STATE OF OREGON

Certificate of Law School Graduation

Please Forward this Form to the Registrar of your Law School

Application for Admission to the Bar of:

_____ **(Student's Full Name)**

I do hereby certify that:

A. The applicant named above studied law at: _____

B. Applicant was awarded the degree of: _____

C. Applicant received said degree on: _____
(Date conferred)

D. Applicant's record does not reflect adversely on his/her fitness to practice law; and during his/her attendance at this law school, he/she has not been subject to any disciplinary action, except:

E. Said law school **WAS ACCREDITED BY THE AMERICAN BAR ASSOCIATION** on or before the date on which applicant received said degree; and

F. At said law school I hold the title of: _____

Certified by: _____
(Print Name)

Signature: _____
(Original Signature Required)

Date of Certification: _____

(SCHOOL OR NOTARY SEAL)

If school has no official seal, a notary execution must reflect the official and verified status of this certificate.

Please return this completed form to:

Oregon Board of Bar Examiners
16037 SW Upper Boones Ferry Rd
PO Box 231935
Tigard, OR 97281-1935

Oregon State Bar

Statement of Professionalism

*Adopted by the Oregon State Bar House of Delegates and
Approved by the Supreme Court of Oregon effective November 16, 2006*

As lawyers, we belong to a profession that serves our clients and the public good. As officers of the court, we aspire to a professional standard of conduct that goes beyond merely complying with the ethical rules. Professionalism is the courage to care about and act for the benefit of our clients, our peers, our careers, and the public good. Because we are committed to professionalism, we will conduct ourselves in a way consistent with the following principles in dealing with our clients, opposing parties, opposing counsel, the courts, and the public.

- I will promote the integrity of the profession and the legal system.
- I will work to ensure access to justice for all segments of society.
- I will avoid all forms of unlawful or unethical discrimination.
- I will protect and improve the image of the legal profession in the eyes of the public.
- I will promote respect for the courts.
- I will support the education of the public about the legal system.
- I will work to achieve my client's goals, while at the same time maintain my professional ability to give independent legal advice to my client.
- I will always advise my clients of the costs and potential benefits or risks of any considered legal position or course of action.
- I will communicate fully and openly with my client, and use written fee agreements with my clients.
- I will not employ tactics that are intended to delay, harass, or drain the financial resources of any party.
- I will always be prepared for any proceeding in which I am representing my client.
- I will be courteous and respectful to my clients, to adverse litigants and adverse counsel, and to the court.
- I will only pursue positions and litigation that have merit.
- I will explore all legitimate methods and opportunities to resolve disputes at every stage in my representation of my client.
- I will support pro bono activities.



Oregon State
Board of
Bar Examiners

**(Please Sign and Returned this Form to
the Board of Bar Examiners With Your Application)**

OREGON STATE BAR

Committee on Professionalism

I, _____ (please print name),
declare that I am an applicant for membership in the Oregon
State Bar and that I have read the Statement of Professionalism
provided by the Board of Bar examiners. Furthermore, I declare
that while I am engaged in the practice of law as a member of
the Oregon State Bar, I will subscribe to the principles set out in
the Statement of Professionalism.

Signature



Oregon State
Board of
Bar Examiners

Notice:

Fingerprinting Instructions

To complete your application you will need to have your fingerprints taken. Included in the application is an example of the required fields that must be completed on the fingerprint card.

1. You *must* submit your completed fingerprint card with your application.
2. Your fingerprints must be taken by an agency authorized to perform fingerprinting. Most municipal police departments and local sheriff's offices can do this for you. The Admissions Department does **not** provide fingerprinting services.
3. For obvious reasons, the application obtained from the Admissions web site does not include a blank fingerprint card for your use. Any agency authorized to perform fingerprinting should be able to provide you a fingerprint card.
4. The Board of Bar Examiners' ORI # is OR0030SB0. Include this number on your fingerprint card.
5. Repeat exam takers applying within four (4) years of previous application do **not** need to have their fingerprints taken again.

Suggested Fingerprinting Services in Oregon (please call business for hours of operation):

Public Safety Training Center
12700 SW 83rd Avenue
Clackamas, OR - 503-794-8065


Fingerprinting Services & Investigations
319 SW Washington Street, Suite 606
Portland, OR – 888-680-2973
www.fingerprintingservices.net

Beaverton City Hall
4755 SW Griffith
Beaverton, OR – 503-526-2222
Mon-Thu 11:30-1:30 – no appt necessary

Oregon State Police
3772 Portland Road, NE Building C
Salem, OR – 503-378-3070

Univ. of Oregon – Dept. of Public Safety
1319 E 15th Avenue, Straub Hall
Eugene, OR – 541-346-2919
<http://safetyweb.uoregon.edu/>

Washington County Sheriff's Office
215 SW Adams Avenue
Hillsboro, OR – 503-846-2761

APPLICANT		LEAVE BLANK		TYPE OR PRINT ALL INFORMATION IN BLACK				FBI		LEAVE BLANK	
		LAST NAME <u>NAM</u>		FIRST NAME <u>John</u>		MIDDLE NAME <u>Z</u>					
SIGNATURE OF PERSON FINGERPRINTED 		ALIASES <u>AKA</u> <u>N/A</u>		OR I		OR0030SBO		DATE OF BIRTH <u>DOB</u> Month <u>01</u> Day <u>01</u> Year <u>1900</u>			
RESIDENCE OF PERSON FINGERPRINTED <u>123 ABC Street</u> <u>City, State, Zip</u>		CITIZENSHIP <u>CIT</u> <u>USA</u>		SEX <u>M</u>		RACE		HGT <u>6'2"</u>		WGT <u>200</u>	
DATE		SIGNATURE OF OFFICIAL TAKING FINGERPRINTS		YOUR NO. <u>OCA</u>		EYES <u>Gr</u>		HAIR <u>Br</u>		PLACE OF BIRTH <u>POB</u> <u>City, State</u>	
EMPLOYER AND ADDRESS BOARD OF BAR EXAMINERS 16037 S.W. Upper Boones Ferry Rd. Tigard, OR 97224		FBI NO. <u>FBI</u>		ARMED FORCES NO. <u>MNU</u>		SOCIAL SECURITY NO. <u>SOC</u> <u>000-00-0000</u>		MISCELLANEOUS NO. <u>MNU</u>		LEAVE BLANK	
REASON FINGERPRINTED BAR EXAMINATION APPLICANT								CLASS _____		REF. _____	
1. R. THUMB		2. R. INDEX		3. R. MIDDLE		4. R. RING		5. R. LITTLE			
6. L. THUMB		7. L. INDEX		8. L. MIDDLE		9. L. RING		10. L. LITTLE			
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY +				L. THUMB		R. THUMB		RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY +			

Oregon State Bar
Request for Demographics Information (Optional)

The Oregon State Bar (OSB) relies on demographics information provided to support efforts to increase the diversity of the OSB, to advance its mission and values and to maintain accurate demographics data of OSB members.¹ A diverse bar is necessary to remove barriers to justice, promote respect for the rule of law, improve the quality of legal services and increase access to justice. Providing information requested in this section is voluntary and refusal to provide such information will not result in any adverse treatment. Demographics information is not used in the bar exam grading process and will be considered confidential to the fullest extent allowed by law; it will not be disclosed unless authorized by you or as required by law. It may be summarized and shared to advance the mission of the OSB; however, data reported will not include any personally identifiable information.²

Examination Date (Month & Year): _____

Name: _____ Phone: _____

Address: _____

E-mail: _____

Law School: _____ Graduation (Month & Year) _____

I choose not to disclose any or all information

Gender:

Female

Male

¹ The mission of the Oregon State Bar is to serve justice by promoting respect for the rule of law, by improving the quality of legal services, and by increasing access to justice. The bar is committed to serving and valuing its diverse community, to advancing equality in the justice system, and to removing barriers to that system.

² The OSB is subject to the Public Records Law. Pursuant to ORS 192.502(4) information submitted voluntarily and in confidence is exempt from disclosure if the public interest would suffer by disclosure. .

Race/Ethnicity:

Select all that apply, including multiple categories for two or more race/ethnicity.

- American Indian or Alaskan Native
- Asian or Pacific Islander
- Black or African American
- Hispanic or Latino
- White or Caucasian
- Self-Identification _____

Disability:

I have a disability (physical or mental impairment) that substantially limits one or more major life activity

- Yes NO

Sexual Orientation:

- Heterosexual
- Lesbian, Gay, Bisexual or Transgender (LGBT)

Check "Yes" below if you would like to receive information about the Oregon State Bar's diversity & inclusion programs and initiatives.

- Yes



Oregon State
Board of
Bar Examiners

AUTHORIZATION FORM (OPTIONAL)

It is common for reciprocity applicants who have questions about the status of their applications to have their office assistants contact the Board of Bar Examiners. However, the Board maintains strict confidentiality regarding the application process itself and all information included in the application materials.

Therefore, if you would like to authorize another person to receive information about your application, please fill out the information below.

This authorization is purely optional and is not required in order to process your application.

I hereby authorize _____
to contact the Board of Bar Examiners on my behalf to inquire about the status of my application for admission and to receive information about my application. I understand that such information is normally kept confidential, but hereby waive my right to confidentiality with respect to the authorized person named herein.

Name: _____
(PLEASE PRINT)

Signature: _____

Date: _____

RFA 15.05 LIST OF QUALIFYING JURISDICTIONS

ALABAMA	MASSACHUSETTS	TENNESSEE
ALASKA	MICHIGAN	TEXAS
ARIZONA	MINNESOTA	UTAH
ARKANSAS	MISSISSIPPI	VERMONT
COLORADO	MISSOURI	VIRGINIA
CONNECTICUT	NEBRASKA	WASHINGTON
DISTRICT OF COLUMBIA	NEW HAMPSHIRE	WEST VIRGINIA
GEORGIA	NEW YORK	WISCONSIN
IDAHO	NORTH CAROLINA	WYOMING
ILLINOIS	NORTH DAKOTA	
INDIANA	OHIO	
IOWA	OKLAHOMA	
KANSAS	PENNSYLVANIA	
KENTUCKY	SOUTH DAKOTA	



Oregon State
Board of
Bar Examiners

OREGON STATE BOARD OF BAR EXAMINERS

16037 SW UPPER BOONES FERRY ROAD

TIGARD, OR 97224

503.620.0222, EXTS. 310, 311, 316 AND 419

TOLL FREE IN OREGON 1.800.452.8260

FAX: 503.684.1366

www.osbar.org

Questions about the Admission Process?

- ✓ **General Questions** – You can go to the Admissions home page on the Oregon State Bar website:
<http://www.osbar.org/admissions>
- ✓ **Rules** – You can find a complete set of rules at the link below:
<http://www.osbar.org/docs/rulesregs/admissions.pdf>
- ✓ **Frequently Asked Questions** – please refer to:
<http://www.osbar.org/docs/admissions/Q&A.pdf>
- ✓ **Forms Library** – For Special Accommodation forms, Laptop Exam Information, Change of Address form, Certificate of Graduation, please refer to:
<http://www.osbar.org/admissions/index.html#forms>