

**BOARD OF BAR EXAMINERS OF THE  
DELAWARE SUPREME COURT**

**APPLICATION FOR  
CERTIFICATION OF 2020  
TEMPORARY LIMITED PRACTICE PRIVILEGE**

**INSTRUCTIONS**

Your application to the Delaware Board of Bar Examiners of the Supreme Court of Delaware (the “Board”) for certification under the Order Regarding Certified Limited Practice Privilege For 2020 Delaware Bar Applicants consists of three parts: this Application Form; your 2020 electronic Delaware bar application and an executed Supervising Attorney’s unsworn affidavit.

***THE APPLICATION FORM.*** A copy of this completed application form and your Supervising Attorney’s unsworn affidavit must be submitted to the Board via email to the following email address:

bbe2020lppriv@bbede.org

***CHARACTER AND FITNESS.*** You will be contacted by the Board Member assigned to perform your character and fitness investigation in accordance with Supreme Court Rule 52(a)(1) and paragraph 2(D) of the Order once your Application has been processed.

***DUTY OF CANDOR AND TO UPDATE YOUR APPLICATION.*** You have a duty of candor and an obligation to provide truthful, correct, and complete information with respect to the application and any information or documentation provided by you in connection with it. Falsifying or willfully omitting any information or documentation may result in the Board recommending to the Delaware Supreme Court that your application be denied. The duty of candor and obligation to provide truthful, accurate, and complete information continues until such time as you may be admitted to the Delaware bar by the Delaware Supreme Court. You have an obligation, therefore, to submit promptly any changes or updates to your application if at any time the information you provide in your application is no longer truthful, accurate, and complete. You must update your application as soon as reasonably possible if the need to update arises. The duty to update continues so long as your application remains pending and until such time as you may be admitted to the Delaware bar by the Delaware Supreme Court.

**\* YOU MUST INCLUDE ALL REQUIRED FORMS WITH YOUR APPLICATION. THE BOARD WILL NOT CONSIDER YOUR APPLICATION UNTIL IT IS COMPLETE AND ALL REQUIRED INFORMATION AND FORMS HAVE BEEN SUBMITTED.**

## **APPLICATION**

I hereby apply for the 2020 Temporary Limited Practice Privilege in the State of Delaware, pursuant to the Order Regarding Certified Limited Practice Privilege For 2020 Delaware Bar Applicants (the “Order”) and certify that all information provided below is complete and accurate.

**1. Full Legal Name**

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**2. Supervising Attorney Pursuant To Paragraph 2(E) of the Order.**

**Name**

**Delaware Bar ID No.**

**Firm/Organization**

**Address**

**Telephone**

**Email**

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**3. Certify the accuracy of each of the following by typing your initials.**

I have carefully read the Order and understand my obligations as an applicant for limited practice permission.

I submitted a timely application to the Delaware Bar in 2020 (the “2020 Application”). The 2020 Application has not been withdrawn and is accurate as of the date of this certification. Without limiting the generality of the foregoing, I specifically certify that the 2020

Application contains my accurate current address, phone number, email and employer (if any).

The 2020 Application provides information showing that I meet the requirements of Supreme Court Rule 52(a)(2), (3), (4), (5) and (6).

The executed unsworn affidavit of my Supervising Attorney in accordance with paragraph 4 of the Order is attached to, or submitted with, this form.

I have read and agree to abide by the Delaware Lawyers' Rules of Professional Conduct and Principles of Professionalism for Delaware Lawyers if this application is granted.

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I have read the foregoing questions and instructions, have answered all questions fully and frankly, and hereby affirm that all of the information provided herein is, to the best of my own knowledge, true, correct, and complete in all respects. I am aware that I have a duty promptly to inform the Delaware Board of Bar Examiners of any circumstances occurring after the date of this application that would affect my responses herein.

Signature \_\_\_\_\_  
Date \_\_\_\_\_