APPLICATION FOR ADMISSION

Law School Attending or Graduated From: [ Provide name of law school.]

Graduation Date: [ Specify date of graduation.]

MPRE STATUS

Date Taken: [ Specify date of MPRE attempt.]
Score: [ Specify MPRE score.]
Date will take: [ Specify date of next MPRE attempt.]

NCBE Number: [ Specify NCBE number.]

☐ Check if you will sign up to use ExamSoft. (Sign up is from April 1 to June 1 at www.examsoft.com/debar)

☐ Check if you have applied for and/or taken the Delaware Bar. (You must upload a complete copy of your previous application.)
What Year(s)? [ Specify years if applicable.]

☐ Check if you have been admitted to the Bar in another state.
PRECEPTOR'S CERTIFICATE
(due on or before September 1)

I, ____________________________, a member of the Bar of the Supreme Court of the State of Delaware, and preceptor for ____________________________ (“Applicant”), who has filed an Application for Admission to the Bar of the Supreme Court of the State of Delaware (“Application”), do hereby certify as follows:

(1) I have been admitted to practice before the courts of this State for at least ten (10) years prior to undertaking my duties as preceptor;

(2) I have studied carefully Supreme Court Rule 52 and Rule 10 of the Rules of the Board of Bar Examiners of the Delaware Supreme Court;

(3) Within the past three years I have attended a meeting of preceptors held on a date and time designated by the Board or have reviewed the video of such meeting and submitted a certificate of attendance to the Board;

(4) I am or will be mentoring Applicant with respect to civility, legal ethics, professionalism, and the expected conduct and obligations of a member of the Delaware Bar; and

(5) I have personally reviewed and discussed with Applicant the Application and First Affidavit of Completeness, as well as all documents and forms submitted in connection with the Application and First Affidavit of Completeness, except that I have not reviewed or discussed with Applicant Questions 26, 27, or 28 on the Application, nor have I reviewed or discussed with Applicant any documents and forms Applicant is submitting in connection with Questions 26, 27, or 28.

(6) I have complied with the requirements of Board Rule 10(c).

Date: ____________________________  ____________________________

Preceptor
PRECEPTOR’S LAW CLERK SCHEDULE CERTIFICATE

I, ________________________, preceptor for ________________________________, an applicant for admission to the Bar of the Supreme Court of the State of Delaware (the “applicant”), do hereby certify as follows:

1. I know the applicant;

2. I am satisfied that the applicant is a person of good moral character and reputation;

3. I am satisfied that the applicant possesses such qualities, aptitudes and disposition as fit the applicant for the practice of law;

4. I am satisfied that the applicant is qualified to take the Bar Examination and to be admitted to the Bar of the State of Delaware;

5. I do hereby certify pursuant to the Board of Bar Examiners Rule BR-10 (d)(2) that said applicant has served a clerkship in the State of Delaware, aggregating substantially full-time service for at least five months’ (21 forty-hour weeks’) duration in full compliance with Delaware Supreme Court Rule 52(a)(8) and has completed the items indicated on the Law Clerk Schedule.

6. In providing this Certificate, I represent that:

   (i) I have been admitted to practice before the courts of this State for more than ten (10) years prior to undertaking my duties as preceptor;

   (ii) I have read and complied with all applicable provisions of Supreme Court Rule 52 and BR-10;

   (iii) I have attended a meeting of preceptors conducted by the Board within the past three years either in person or by video; and

   (iv) I understand that the Board and the Supreme Court are relying on my certifications as preceptor and that I may be held accountable to the Supreme Court for failure to perform adequately my duties and obligations as a preceptor.

________________________________________
Signature of Preceptor

________________________________________
Date
BOARD OF BAR EXAMINERS
OF THE DELAWARE SUPREME COURT

2018 LAW CLERK SCHEDULE OF LEGAL
ASSIGNMENTS

Applicant Name: ____________________________ Date: __________

Address: __________________________________________

Phone Number: ________________ Email: ________________________

Preceptor’s Name: _______________________________________

Performance of the following assignments is to be considered the minimum requirement for each applicant for admission to the Delaware Bar. These assignments must be performed in the State of Delaware after matriculation at law school and before admission to the Delaware Bar. Responsibility for scheduling rests on the applicant; making these arrangements is regarded as an important part of the clerkship training. Either your preceptor or a “Qualified” member of the Delaware Bar must supervise each completed assignment.

For purposes of this Schedule, “Attend” means in person appearance at the proceeding until completion of the proceeding, or one-half day, whichever is shorter, except as specified in assignments 9 and 10 below. Note that if an assignment permits you to review a transcript or listen to/watch a recording in lieu of attending in person, attendance in person is strongly preferred and you must make a good faith effort to attend the proceeding in person. It is important to note that court cases often settle at the last minute. Therefore, you should begin your efforts to complete these assignments early in your clerkship.

For each assignment, you must list the date you complete it and provide a brief description of the project. For example, for hearings or other court proceedings or any review of papers from a court case, you should include at least the case name and number. For proceedings that may involve multiple matters (e.g., arraignments and sentencings), include the name of the presiding judge and the start and end time of the proceedings. For any review of papers relating to the formation of an entity, include at least the name of the company and the name(s) of the person(s) who formed it. You may be asked about specific assignments at your character and fitness interview, so it is advisable to include brief notes that may help you recall the nature of each assignment if asked. You must also include the name of the qualified member of the Delaware Bar who supervised each completed assignment.

Once you have completed the Schedule, please execute the certification on page 4.
and submit the Schedule to the Board of Bar Examiners, along with the fully-executed Certificate of Preceptor.

ASSIGNMENT

1. Attend one civil trial in a Justice of the Peace Court.
   
   Date Completed __________
   
   Description: 
   
   Supervisor: 

2. Attend one weekly session of Protection from Abuse ("PFA") hearings in Family Court.
   
   Date Completed __________
   
   Description: 
   
   Supervisor: 

3. Attend one Guardianship or Dependency/Neglect hearing in Family Court.
   
   Date Completed __________
   
   Description: 
   
   Supervisor: 

4. Attend (or listen to a recording of) one civil trial in Court of Common Pleas.
   
   Date Completed __________
   
   Description: 
   
   Supervisor: 

5. Attend one criminal trial in the Court of Common Pleas.
   
   Date Completed __________
   
   Description: 
   
   Supervisor:
6. Attend one ADR Proceeding in Delaware under the Rules of any Delaware State or Federal Court or, alternatively, attend one arbitration or mediation in Delaware under the Rules of the American Arbitration Association or any similar ADR organization.

Date Completed __________

Description:

Supervisor:

7. Attend one session of arraignments in Superior Court.

Date Completed __________

Description:

Supervisor:

8. Attend one session of **sentencing** in Superior Court.

Date Completed __________

Description:

Supervisor:

9. Attend one complete jury selection in Superior Court or District Court.

Date Completed __________

Description:

Supervisor:

10. Attend a criminal trial in Superior Court or District Court. This must include (i) either a complete opening statement or a complete closing argument; and (ii) direct and cross examinations of one witness.

Date Completed __________

Description:

Supervisor:
11. Attend a civil trial in Superior Court or District Court. This must include (i) either a complete opening statement or a complete closing argument; and (ii) direct and cross examinations of one witness.

Date Completed __________

Description:

Supervisor:

12. Attend a pre-trial conference in District Court, Court of Chancery or Superior Court.

Date Completed __________

Description:

Supervisor:

13. Attend an argument of a motion in Superior Court after reviewing the applicable motion papers and reviewing the principal authorities relied upon by the parties.

Date Completed __________

Description:

Supervisor:

14. Attend a trial or a complete hearing in the Court of Chancery. For a trial, this must include (i) either a complete opening statement or a complete closing argument; and (ii) direct and cross examinations of one witness.

Date Completed __________

Description:

Supervisor:

15. Review papers relating to an appeal of a final judgment to the Delaware Supreme Court, including designation of the record on appeal.

Date Completed __________

Description:

Supervisor:
16. Review papers relating to a recent certification of a question of law or interlocutory appeal to the Delaware Supreme Court.

Date Completed __________

Description: ____________________________

Supervisor: ________________________________

17. Attend an argument in the Delaware Supreme Court after reviewing applicable briefs, and reviewing the principal authorities relied upon by the parties.

Date Completed __________

Description: ____________________________

Supervisor: ________________________________

18. Attend an interview of a client, witness or litigant.

Date Completed __________

Description: ____________________________

Supervisor: ________________________________

19. Review papers relating to a recently commenced Superior Court civil action, including Complaint, Praecipe, Summons and Civil Information Sheet.

Date Completed __________

Description: ____________________________

Supervisor: ________________________________

20. Attend one contested deposition.

Date Completed __________

Description: ____________________________

Supervisor: ________________________________

21. Review and summarize three recently closed, fully and formally probated estates at the Register of Wills, at least two of which must have been distributed under a will.
22. Review papers relating to the formation of a Delaware corporation, Limited Partnership, Limited Liability Corporation (LLC) or Limited Liability Partnership (LLP).

Date Completed __________

Description:

Supervisor:

23. Attend a hearing of the Delaware Alcoholic Beverage Control Commission, Industrial Accident Board, or other adversarial hearing before a Delaware state administrative agency.

Date Completed __________

Description:

Supervisor:

24. Attend a half day of omnibus chapter 13 bankruptcy hearings. Note: These hearings are typically held only once per month.

Date Completed __________

Description:

Supervisor:

25. Attend (or review a transcript of) a “First-Day” hearing in a chapter 11 bankruptcy case where the assets or liabilities exceed $20 million after reviewing the “First-Day” pleadings and the principal authorities relied upon in those pleadings.

Date Completed __________

Description:

Supervisor:
26. Attend an omnibus hearing in a chapter 11 bankruptcy case where at least one unresolved contested matter is presented.

Date Completed ____________

Description: 

Supervisor: 

* * * * * * * * * *

I ____________________________, hereby certify that I have completed a clerkship in the State of Delaware under the supervision of a Delaware attorney aggregating substantially full-time service for at least five months' duration (21 weeks) in full compliance with Delaware Supreme Court Rule 52(a)(8) and have completed all of the items so indicated on this Law Clerk Schedule.

__________________________________________
Signature

__________________________________________
Date
TEST UPLOAD:

FBI BACKGROUND CHECK
TEST UPLOAD:

STATE BACKGROUND CHECK
TEST UPLOAD:

DELAWARE BAR
APPLICATION FROM
PREVIOUS YEAR
TEST UPLOAD:

FIRST AFFIDAVIT OF COMPLETENESS
TEST UPLOAD:

FIRST SUPPLEMENTAL AFFIDAVIT OF COMPLETENESS
TEST UPLOAD:

SECOND SUPPLEMENTAL AFFIDAVIT OF COMPLETENESS
TEST UPLOAD:

EXECUTED
AUTHORIZATION AND
RELEASE
APPLICATION

Name: [Redacted]
SSN: [Redacted]

Have you ever used or been known by any other name, alias, or surname?

Yes

If the answer to the above question is 'Yes', list all of the other names, aliases or surnames you have used or been known by in the table at the bottom of the page. For each instance, describe when, how, and why your name was changed (e.g. marriage, divorce, legal decree, etc.).

If any change was the result of a legal decree, please remember to upload a copy of said decree.

Sex: [Redacted]
Birth Date: [Redacted]
Place of birth: [Redacted]
City: [Redacted]
State: [Redacted]
Country: [Redacted]

Of what country are you a citizen?

If you are not a citizen of the United States, what is your immigration status?
RESIDENCE HISTORY

Question 1

List the street address for each location at which you have physically resided for a period of at least 30 consecutive days at any time during the last ten years. If there is a period of time of at least 30 consecutive days where you did not physically reside at one location, please add an entry with an explanation of where you resided during that time.

NOTE: For each location, the "From" and "To" information you provide is a representation that you physically resided at that location for the entire period of time listed. You may therefore need to list a single address multiple times if you temporarily resided at another location (such as during college).
<table>
<thead>
<tr>
<th>FROM</th>
<th>TO</th>
<th>ADDR1</th>
<th>ADDR2</th>
<th>CITY</th>
<th>COUNTY</th>
<th>STATE</th>
<th>ZIP/POSTAL</th>
<th>COUNTRY</th>
</tr>
</thead>
<tbody>
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<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
EDUCATION (OTHER THAN LAW SCHOOLS)

Question 2

List the names of all the colleges and universities other than law schools you attended, their location (including the name of the campus if the school had more than one), the dates attended, and the degree received. Indicate if you did not receive a degree.

Submit one official, certified transcript from each college or university you attended irrespective of whether you graduated from that college or university or whether the credit appears on another transcript. This requirement may be satisfied by submitting a copy of your transcript in electronic PDF format, provided that (i) the college or university in question considers the electronic copy to be an official document, and (ii) the electronic copy has been digitally signed and certified by the college or university and the Board can validate its authenticity automatically.
<table>
<thead>
<tr>
<th>From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td>College</td>
<td>City</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
EDUCATION (LAW SCHOOLS)

Question 3

List the names of all the law schools you attended, their location (including the name of the campus, if the school had more than one), the dates attended, and the degree received. Indicate if you did not receive a degree.

Upload one official, certified transcript for each law school you attended irrespective of whether you graduated from that law school. The original of each transcript that you upload must be provided to the Board member who conducts your character and fitness interview at the time of the interview. Original transcripts may be in electronic PDF format, provided that (i) the law school in question considers the electronic copy to be an official document, and (ii) the electronic copy has been digitally signed and certified by the law school and the Board can validate its authenticity automatically.

Submit one copy of your law school application for every law school you attended.
Education (Law Schools) - DETAIL ENTRY

From
To
Degree
Law School
TEST UPLOAD:

LAW SCHOOL APPLICATION
TEST UPLOAD:

LAW SCHOOL TRANSCRIPT
EDUCATION (DISCIPLINE ISSUES)

Question 4

Have you ever been dropped, suspended, warned, placed on scholastic or disciplinary probation, expelled or requested to resign or allowed to resign in lieu of discipline from any college, university, law school or otherwise subjected to discipline by any such institution or requested or advised by any such institution to discontinue your studies therein?

No

If you answered "Yes", provide details below:
| Date of the Institution Action (mm/yyyy) | |
| Name of the Institution | |
| Explanation | |

**Education (Discipline Issues) - DETAIL ENTRY**
PRIOR APPLICATIONS FOR ADMISSION

Question 5

Have you ever submitted an application to be admitted by examination, motion, or diploma privilege, or to be reinstated to the Bar in any state?

Yes

If you answered "Yes", list every state to which you have ever submitted an application to be admitted by examination, motion or diploma privilege, or to be reinstated to the Bar. Provide a brief narrative explanation of the circumstances surrounding the reasons for any withdrawals of applications or failures to be admitted (including denials other than those due to failing the examination).

Upload a copy of your application to each such Bar as well as an official certificate in good standing for each Bar to which you are admitted.

If admitted in Pennsylvania, complete and upload FORM 5A. If admitted in New York, indicate the judicial department to which you are admitted, and also complete and upload FORM 5B.
Prior Applications for Admission - DETAIL ENTRY

<table>
<thead>
<tr>
<th>State</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Admission by</td>
<td></td>
</tr>
<tr>
<td>Not Admitted</td>
<td></td>
</tr>
<tr>
<td>Application Dates</td>
<td></td>
</tr>
<tr>
<td>Exam Dates</td>
<td></td>
</tr>
<tr>
<td>Admitted or readmitted (mm/yyyy)</td>
<td></td>
</tr>
<tr>
<td>Bar Identification</td>
<td></td>
</tr>
<tr>
<td>Explanation</td>
<td></td>
</tr>
</tbody>
</table>
FORM 5 / PRIOR ADMISSIONS

FORM 5A
For applicants previously admitted in PENNSYLVANIA

Name ____________________________________________
Attorney I.D. Number ________________________________
Date Of Admission _________________________________
District Admitted In: ** Please Select **

FORM 5B
For applicants previously admitted in NEW YORK

Name ____________________________________________
Date Of Admission _________________________________
Department in which you were admitted: ** Please Select **
Department(s) in which you have practiced law or been employed as an attorney (check ALL that apply):

☐ First Department  ☐ Second Department
☐ Third Department  ☐ Fourth Department
☐ None

Other, please explain on a separate piece of paper
TEST UPLOAD:

QUESTION 5 — BAR APPLICATION FROM OTHER JURISDICTION
TEST UPLOAD:

FORM 5
TEST UPLOAD:

GOOD STANDING CERTIFICATE
JUDICIAL OFFICE

Question 6

Have you ever held judicial office?

No

If you answered "Yes", provide details about each office below:
<table>
<thead>
<tr>
<th>From</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>To</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>#foo#</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td></td>
</tr>
<tr>
<td>State</td>
<td></td>
</tr>
<tr>
<td>Zip Code</td>
<td></td>
</tr>
<tr>
<td>Office Held</td>
<td></td>
</tr>
<tr>
<td>Reason for termination, if applicable</td>
<td></td>
</tr>
</tbody>
</table>
MEMBERSHIP IN REGULATORY/DISCIPLINARY BODY

Question 7

Are you currently or have you ever been a member of or subject to the authority of a court bar, bar association, disciplinary agency, regulatory body, or other entity that exercises regulatory or disciplinary authority over its members?

NOTE: This question covers regulatory or disciplinary entities for all professions, occupations, and industries, not just those which are law-related. It includes, for example, national bodies such as the Financial Industry Regulatory Authority (FINRA) and the American Institute of CPAs (AICPA), as well as state entities that regulate the practice of a profession or occupation within a state (such as, for example, the regulatory bodies identified in Title 24 of the Delaware Code).

No

If you answered "Yes", list below the full name, address, and telephone number of each such court, bar association, disciplinary agency, regulatory body, or other entity:
Membership in Regulatory/Disciplinary Body - DETAIL ENTRY

Membership
From
(mm/yyyy)
To
Name of bar association or disciplinary agency
Address
#foo#
City
State
Zip Code
DISCIPLINARY HISTORY

Question 8

A. Have you ever been disbarred, suspended, censured, or otherwise reprimanded or disqualified as an attorney?

No

B. Have you ever been the subject of any formal or informal charge, complaint, grievance, investigation, or inquiry regarding your conduct as an attorney?

No

If you answered "Yes" to either of the above, provide details below:
<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action Date</td>
<td>(mm/yyyy)</td>
</tr>
<tr>
<td>Name of Disciplinary Agency</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td>#foo#</td>
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<tr>
<td>City</td>
<td></td>
</tr>
<tr>
<td>State</td>
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<tr>
<td>Zip Code</td>
<td></td>
</tr>
<tr>
<td>Agency Action</td>
<td></td>
</tr>
<tr>
<td>Explanation</td>
<td></td>
</tr>
</tbody>
</table>
CHARGE / COMPLAINT / GRIEVANCE HISTORY

Question 9

Have you ever been the subject of any formal or informal charge, complaint, grievance, investigation, or inquiry regarding the unauthorized practice of law?

No

If you answered "Yes", provide details below:
<table>
<thead>
<tr>
<th>Action Date (mm/yyyy)</th>
<th>[Redacted]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Regulatory Agency</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>Address #foo#</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>City</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>State</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>Zip Code</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>Agency Action</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>Explanation</td>
<td>[Redacted]</td>
</tr>
</tbody>
</table>
SANCTION / DISQUALIFICATION HISTORY

Question 10

Have sanctions ever been entered against you or have you ever been disqualified from participating in any case?

No

If you answered "Yes", provide details below:
<table>
<thead>
<tr>
<th>Type of Action</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Number</td>
<td></td>
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<tr>
<td>Disqualified</td>
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<td>From (mm/yyyy)</td>
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<td>To</td>
<td></td>
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<td>Name of Court</td>
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<td>#foo#</td>
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<tr>
<td>City</td>
<td></td>
</tr>
<tr>
<td>State</td>
<td></td>
</tr>
<tr>
<td>Zip Code</td>
<td></td>
</tr>
<tr>
<td>Reason for the disqualification or sanction</td>
<td></td>
</tr>
</tbody>
</table>
MILITARY SERVICE

Question 11

A. Have you ever been a member of the United States Armed Forces, meaning the Army, Marine Corps, Navy, Air Force, Coast Guard, Army Reserve, Marine Corps Reserve, Navy Reserve, Air Force Reserve, Coast Guard Reserve, Army National Guard of the United States, or Air National Guard of the United States?

No

If you answered "Yes", complete and upload FORM 11A.

B. Have you ever performed any other kind of military service, including service in a civilian auxiliary of the United States military (e.g., Civil Air Patrol, Merchant Marines, Coast Guard Auxiliary), a state defense force (e.g., Texas State Guard, Ohio Military Reserve, California Naval Militia), the Puerto Rico State Guard, or the military of another country (e.g., Israeli Defense Forces)?

No

If you answered "Yes", complete and upload FORM 11B.
TEST UPLOAD:

FORM 11A
TEST UPLOAD:

FORM 11B
EMPLOYMENT AND UNEMPLOYMENT HISTORY

PREAMBLE TO QUESTIONS 12 AND 13

For purposes of responding to Questions 12 and 13, the term "employment" means any kind of employment or work, without regard to whether the work was full-time, part-time, or temporary in nature, or whether you were compensated for the work. This includes, for example, self-employment, clerkships (judicial or otherwise), internships, externships, fellowships. It does not matter if you received school credit instead of monetary compensation for the work.

Question 12

List your employment history since you were eighteen years of age, or the past 10 years, whichever is shorter. If your work history includes temporary employment where you worked for an employer but were paid by a temporary staffing agency, you should identify the company for which you performed the work as the "employer" as well as the temporary staffing agency.

Your employment history must also account for each occasion during which you were unemployed (not working) for at least 30 consecutive days. For each such occasion, in the detail entry below you must identify the period of time you were not working using "From" and "To" to indicate the beginning and ending dates, and in the "Position" text box, describe what you were doing during that period of unemployment. You must also select the correct designation so that the system does not indicate that your employment verification is pending when none is expected.

If you are self-employed, or were self-employed at any point during the time period covered by this question, complete the detail entry, which must identify a reference who can verify the nature and length of your self-employment.

NOTE: The Board must receive an online certification for all employment or practice, which must be completed online by your employers by July 1st.

If an employer is no longer in business, indicate the date that the employer went out of business. Do not send an employment certification request but include the employer in this list.

PLEASE NOTE: You do not need to upload copies of your employment certification requests. The system will update your application with the relevant data as each employer completes their certification. Check your "Document Checklist" tab to see which employment certification requests have been completed and which remain outstanding.
<table>
<thead>
<tr>
<th>FROM</th>
<th>TO</th>
<th>POSITION</th>
<th>SUPERVISOR</th>
<th>EMPLOYER OR FIRM (AT TIME OF EMPLOYMENT)</th>
<th>ADDR1</th>
<th>ADDR2</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP/POSTAL</th>
<th>PHONE</th>
<th>EMPLOYER'S CURRENT NAME AND ADDRESS (IF DIFFERENT)</th>
<th>ADDR1</th>
<th>ADDR2</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP/POSTAL</th>
<th>PHONE</th>
<th>IF YOU ARE SELF-EMPLOYED, PROVIDE A REFERENCE WHO CAN VERIFY THE NATURE AND LENGTH OF YOUR EMPLOYMENT (RESIDENCE OR BUSINESS)</th>
<th>NAME</th>
<th>ADDR1</th>
<th>ADDR2</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP/POSTAL</th>
<th>PHONE</th>
</tr>
</thead>
</table>

**Sample**
EMPLOYMENT TERMINATION

Question 13

A. Have you ever been terminated, suspended, disciplined or permitted to resign in lieu of termination from any employment?

No

B. Have you ever had an offer of employment rescinded, withdrawn, or altered in a way that you understood limited your ability to accept it, or that the prospective employer discouraged you from accepting?

No

If you answered "Yes" to either of the above, provide details below:
LICENSE DENIAL

Question 14

A. Have you ever been denied a license for a business, trade, or profession (e.g., CPA, real estate broker, physician, etc.)?  
No

B. Have you ever had a business, trade or professional license revoked?  
No

If you answered "Yes" to either of the above, provide details below:
SUSPENSION / CENSURE / REPRIMAND / DISQUALIFICATION

Question 15

A. Have you ever been suspended, censured, or otherwise reprimanded or disqualified as a member of another profession, or as a holder of public office?

No

B. Have you ever been the subject of any formal or informal charge, complaint, grievance, investigation, or inquiry regarding your conduct as a member of another profession or occupation, or as a holder of public office?

No

If you answered "Yes" to either of the above, provide details below:
BOND SURETY

Question 16

Has any surety on any bond on which you were the principal been required to pay any money on your behalf?

No

If you answered "Yes", complete and upload FORM 16.
TEST UPLOAD:

FORM 16
PREAMBLE TO QUESTION 17

For purposes of Question 17, "Affiliated Entity" means any entity in whose management or control you have participated, or any non-public entity in which you have directly or beneficially owned at least a 5% interest. This definition also applies to Questions 18, 19, 24, and 25.

Question 17

A. Have you or an Affiliated Entity ever been named as a party in any civil, administrative, or other proceeding?

No

B. Has there ever been a civil, administrative, or other proceeding in which an allegation was made against you or the Affiliated Entity of fraud, deceit, misrepresentation, forgery or legal malpractice, without regard to whether you or the Affiliated Entity was a party in the proceeding?

NOTE: Family law matters (including orders for child support) should be included here. For an Affiliated Entity, "other proceeding" includes criminal proceedings.

No

If you answered "Yes" to either of the above, complete and upload FORM 17 and upload copies of the complaint, answer, judgment, or dismissal, and any final orders.
TEST UPLOAD:

FORM 17
TEST UPLOAD:

FORM 17 (LITIGATION DOCUMENTS)
TEST UPLOAD:

FORM 17 (DIVORCE DOCUMENTS)
FAILURE TO FILE INCOME TAX

Question 18

Have you or an Affiliated Entity ever failed to file a federal, state, or local income tax return when due and without a lawful extension or have you or an Affiliated Entity ever failed to pay federal, state, or local income taxes when due?

Yes

If you answered "Yes", provide details about each occurrence below:
BANKRUPTCY

Question 19

Have you or an Affiliated Entity ever filed a petition for bankruptcy?

No

If you answered "Yes", complete and upload FORM 19.
TEST UPLOAD:

FORM 19
VIOLATIONS OF LAW INVOLVING ALCOHOL OR DRUGS

Question 20

Have you ever been cited, arrested, charged, accused, prosecuted, or convicted for any offense, misdemeanor, felony, or other violation of any law (including moving traffic violations), which involved alcohol or drugs?

NOTE: This includes matters that have been expunged, been subject to a diversionary program, pardoned or otherwise cleared.

No

If you answered "Yes", complete and upload FORM 20A, FORM 20B, and FORM 20C as appropriate.
TEST UPLOAD:

FORM 20B
TEST UPLOAD:

FORM 20C
TEST UPLOAD:

Q20 — ALCOHOL OR DRUG CASE DOCUMENTS
VIOLATIONS OF LAW NOT INVOLVING ALCOHOL OR DRUGS

Question 21

Have you ever been cited, arrested, charged, accused, prosecuted, or convicted for any offense, misdemeanor, felony, or other violation of any law, in which alcohol or drugs were not involved?

NOTE: This includes matters that have been expunged, been subject to a diversionary program, pardoned, or otherwise cleared. This does not include moving traffic violations, which are covered by Questions 20 and 22.

No

If you answered "Yes", complete and upload FORM 21 for each incident.
TEST UPLOAD:

FORM 21
TEST UPLOAD:

Q21 — CRIMINAL DOCS
MOVING TRAFFIC VIOLATIONS

Question 22

Have you been charged with any moving traffic violations during the past ten years?

NOTE: This does not include moving traffic violations involving drugs or alcohol, which are covered by Question 20, and it does not include parking tickets.

Yes

If you answered "Yes", complete and upload FORM 22 and the required documents.
To be used with Question 22

FORM 22 / RECORD OF TRAFFIC VIOLATIONS

Do not list moving traffic violations involving alcohol or drugs, which are covered by Question 20, and do not list parking violations.

Name
First Middle Last Social Security Number

Date of incident (or time period involved)

Location
City County State

Title of complaint or indictment

Case Number

Name and complete address of court involved

Name of court
Address
City State Zip

Name and address of law enforcement agency involved:

Name of law enforcement agency
Address
City State Zip

Date first heard

Charge(s) at time of arrest
Charge(s) at time of trial
Date of final disposition
Final disposition

Brief description of incident:

Attach a copy of your driving history report from each state in which you held a driver’s license when you received a citation and a copy of the citation or the arresting officer’s report, and, if applicable, the complaint, indictment, trial disposition, sentence, and appeal, if any. If any of these documents exist, or you believe they exist, but you have not attached them to this form, you must include in your First or Second Affidavit of Completeness (or both of them, if necessary) an explanation for why you have not done so. Submitting a copy of only your driving history report is not sufficient.
TEST UPLOAD:

Q22 — TRAFFIC DOCS
Question 23

Have you ever been offered or granted immunity, testified or been called as a witness in any criminal action or criminal proceeding in which you were not a party?

No

If you answered "Yes", provide details below:
CREDITOR ACTIONS

PREAMBLE TO QUESTIONS 24 AND 25

For purposes of Questions 24 and 25, a "creditor" is any person or entity (i) to whom a debt is owed, (ii) that has the right to require the performance of any legal obligation, contract, or guaranty, (iii) that has a legal right to damages arising out of contract or tort, or (iv) that has extended or arranged for the extension of credit (such as a credit card or a home equity line of credit), even if there is currently a zero balance with that creditor.

Question 24

A. Have you or an Affiliated Entity had any debts which have been more than 90 days past due within the past seven years?

Yes

B. Have you or an Affiliated Entity ever had a credit card or charge account revoked?

No

C. Have you or an Affiliated Entity ever defaulted on any debt?

No

D. Have you or an Affiliated Entity ever surrendered a credit account in lieu of recovery action by one or more of your creditors?

No

If you answered "Yes" to any of the above, complete and upload FORM 24 for each debt.
TEST UPLOAD:

FORM 24
CREDITORS

Question 25

For you and any Affiliated Entity, list all creditors you have confirmed are not identified on the credit reports from the three major credit bureaus (TransUnion, Equifax, Experian), including the name, address, and telephone number of the creditor, the account number (if applicable), and the balance on the debt or account as of the date of this application. Upload a copy of the credit reports from the three major credit bureaus listed above that you reviewed in order to respond to this question, which must have been obtained thirty (30) or fewer days before you filed your application.
TEST UPLOAD:

Q25 — EQUIFAX
TEST UPLOAD:

Q25 — EXPERIAN
TEST UPLOAD:

Q25 — TRANSUNION
PAST CONDUCT OR BEHAVIOR

PREAMBLE TO QUESTIONS 26, 27, AND 28

Through this application, the Delaware Board of Bar Examiners (the "Board") makes inquiry about circumstances that may affect an applicant’s ability to meet the professional responsibilities of a lawyer. This information, along with all other information, is treated confidentially by the Board. The purpose of such inquiries is to determine the current fitness of an applicant to practice law. Treatment, monitoring, or participation in a support group are not, by themselves, bases on which the Board will deny admission. The Board encourages applicants who may benefit from assistance to seek it.

The Board may deny admission to applicants whose ability to function is impaired in a manner relevant to the practice of law at the time that the licensing decision is made, or to applicants who demonstrate a lack of candor by their responses. This is consistent with the public purpose that underlies the licensing responsibilities assigned to the Board, and the applicant’s responsibility for demonstrating qualification to practice law.

The Board does not seek information that is fairly characterized as situational counseling. Examples of situational counseling include stress counseling, domestic counseling, grief counseling, and counseling for eating or sleeping disorders.

NOTE: APPLICANTS SEEKING TESTING ACCOMMODATIONS FOR THE BAR EXAM DUE TO A CONDITION, DISABILITY, OR IMPAIRMENT DISCLOSED IN RESPONSE TO THESE QUESTIONS MUST COMPLETE AND FILE A SEPARATE APPLICATION FOR TESTING ACCOMMODATIONS.

Question 26

Within the past five years, have you exhibited any conduct or behavior that could call into question your ability to practice law in a competent, ethical, and professional manner?

No

If you answered "Yes", provide details below:
<table>
<thead>
<tr>
<th>Creditor</th>
<th>Chick-file-A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Account Number</td>
<td>112551</td>
</tr>
<tr>
<td>Balance</td>
<td>1.0000</td>
</tr>
</tbody>
</table>
IMPAIRMENT

Question 27

A. 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 affects your ability to practice law in a competent and professional manner? For purposes of this question, "currently" means recently enough that the condition or impairment could reasonably affect your ability to function as a lawyer.

No

B. If you answered ‘Yes’ to Question 27A, are the limitations or impairments caused by your condition or impairment reduced or ameliorated because you receive ongoing treatment (with or without medication) or because you participate in a monitoring or support program?

No

If you answered "Yes" to either of the above, complete and upload FORM 27A and FORM 27B for each issue.
TEST UPLOAD:

FORM 27A
TEST UPLOAD:

FORM 27B
IMPAIRMENT RAISED AS ISSUE

Question 28

Within the past five years, have you asserted any condition, disability, or impairment as a defense to, in mitigation of, or as an explanation for your conduct in response to or in the course of:

(a) any arrest;

(b) any proposed or actual discipline, sanction, or warning;

(c) any proposed or actual termination or suspension from school or employment;

(d) any proposed or actual loss or suspension of a license;

(e) any inquiry, investigation, or proceeding by an employer, educational institution, government agency, professional organization, or licensing authority;

(f) any proceeding administrative or judicial proceeding by an employer, educational institution, government agency, professional organization, or licensing authority; or

(g) any allegation that you endangered the safety of others, breached fiduciary obligations, or violated workplace or academic conduct rules?

No

If you answered "Yes" to one or more of (a) through (g), complete and upload FORM 28.
FORM 28 / IMPAIRMENT RAISED AS ISSUE

Entity (court, agency, educational institution, etc.) before which issue was raised:

Name: ____________________________________________________________

Address: _________________________________________________________

City: ___________________________ State/Province: ____________________

Postal/ZIP Code: ______________ Country: ____________________________

Telephone: _______________________ Facsimile: _______________________

Email: __________________________________________________________

Nature of the proceeding: __________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

Relevant date(s): _________________________________________________

Current status of the proceeding (and disposition, if applicable): _________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

Explanation: ______________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________
Additional Information - DETAIL ENTRY

Additional Information  Testing
ADDITIONAL INFORMATION

Question 29

Is there any information (event, incident, occurrence, etc.) that was not specifically addressed and/or asked of you in this application and/or in the instructions that could be considered a character issue?

When you have completed this section, click the Back to Application Status button to review and submit your application.

No

If you answered "Yes" provide details below, uploading associated documents as appropriate:
TEST UPLOAD:

Q29 — UPLOAD OTHER DOCS