

JURISDICTION

Application to

Rhode Island

Applying as

- ☐ Admission by Transferred UBE Score (Rule 1B)
- ☐ Admission on Examination (Rule 1)
- ☐ Attorney Admission on Examination (Rule 2(a))

PERSONAL INFORMATION

Applicant Information

Name

First _____ **Middle** _____ **Last** _____ **Suffix** _____

NCBE Number

Social Security Number

Date of birth

Month _____ **Day** _____ **Year** _____

Email address

Email Address _____

Alternate Email Address _____

Sex

☐ Female ☐ Male ☐ Prefer not to answer

Place of birth

City _____ **State** _____

Country _____

Citizenship

Country of citizenship _____

If you are not a citizen of the United States, what is your immigration status (include visa type if applicable and expiration date)?

Names

Have you ever used or been known by a different name?

Note: Your name(s) will be used for identification in correspondence sent to schools, employers, courts, references, etc.

☐ Yes ☐ No

First _____ Middle _____ Last _____ Suffix _____

From Mo/Yr _____ To Mo/Yr _____

Reason for change (Describe how and why you used this name, marriage or divorce, e.g.) _____

Contact Information

Please provide the mailing address and telephone numbers at which you can be reached during the next six months.

If business, name of firm _____

Address/P.O. Box _____

City _____ State _____ Zip _____

Country _____ Province _____

Mobile Phone _____

Office Phone _____

Other Phone _____

APPLICATIONS, AUTHORIZATIONS AND CONDUCT

Law Student Registration

1. Have you ever submitted an application to register as a law student?

Note: This question refers to jurisdiction sponsored law student registration programs (not law school applications nor law student practice applications).

☐ Yes ☐ No

Name of U.S. jurisdiction, tribal court, or foreign jurisdiction _____

Name and address of foreign bar authority _____

Date application made _____

Explanation _____

Bar Exam

2. Have you ever applied to take a bar exam, including the Uniform Bar Exam (UBE)?

Note: Report all exams for which you have applied or registered, even if you did not sit for the exam. Report all exams even if you did not apply for admission to that jurisdiction and regardless of admission status. Omit the MPRE and First-Year Law Student Examinations.

☐ Yes ☐ No

Name of U.S. jurisdiction, tribal court, or foreign jurisdiction _____

Name and address of foreign bar authority _____

Date application made _____ Date examination taken _____

Admission or readmission date (Mo/Day/Yr) _____ Bar number _____

Admitted/registered as: ☐ Attorney ☐ In-House Counsel ☐ Foreign Legal Consultant ☐ Other _____

Reason not admitted (if applicable): ☐ Failed exam ☐ Withdrew application ☐ Pending ☐ Denied ☐ Other reason

Explanation _____

Transferred UBE Score

3. Have you ever applied for admission by transferred Uniform Bar Examination (UBE) score?

☐ Yes ☐ No

Name of U.S. jurisdiction _____

Date application made _____

Admission or readmission date (Mo/Day/Yr) _____ Bar number _____

Admitted/registered as: ☐ Attorney ☐ In-House Counsel ☐ Foreign Legal Consultant ☐ Other _____

Reason not admitted (if applicable): ☐ Withdrew application ☐ Pending ☐ Denied ☐ Other reason

Explanation _____

Motion

4. Have you ever applied for admission on motion?

Note: Do not list U.S. federal court or pro hac vice admissions in response to this question.

☐ Yes ☐ No

Name of U.S. jurisdiction, tribal court, or foreign jurisdiction _____

Name and address of foreign bar authority _____

Date application made _____

Admission or readmission date (Mo/Day/Yr) _____ Bar number _____

Admitted/registered as: ☐ Attorney ☐ In-House Counsel ☐ Foreign Legal Consultant ☐ Other _____

Reason not admitted (if applicable): ☐ Withdrew application ☐ Pending ☐ Denied ☐ Other reason

Explanation _____

Diploma Privilege

5. Have you ever applied for admission by diploma privilege?

☐ Yes ☐ No

Name of U.S. jurisdiction, tribal court, or foreign jurisdiction _____

Name and address of foreign bar authority _____

Date application made _____

Admission or readmission date (Mo/Day/Yr) _____ Bar number _____

Admitted/registered as: ☐ Attorney ☐ In-House Counsel ☐ Foreign Legal Consultant ☐ Other _____

Reason not admitted (if applicable): ☐ Withdrew application ☐ Pending ☐ Denied ☐ Other reason

Explanation _____

Foreign Legal Consultant

6. Have you ever registered as a foreign legal consultant?

☐ Yes ☐ No

Name of U.S. jurisdiction, tribal court, or foreign jurisdiction _____

Name and address of foreign bar authority _____

Date application made _____

Admission or readmission date (Mo/Day/Yr) _____ Bar number _____

Admitted/registered as: ☐ Attorney ☐ In-House Counsel ☐ Foreign Legal Consultant ☐ Other _____

Reason not admitted (if applicable): ☐ Failed exam ☐ Withdrew application ☐ Pending ☐ Denied ☐ Other reason

Explanation _____

In-House Counsel

7. Have you ever registered as in-house counsel?

☐ Yes ☐ No

Name of U.S. jurisdiction, tribal court, or foreign jurisdiction _____

Name and address of foreign bar authority _____

Date application made _____

Admission or readmission date (Mo/Day/Yr) _____ Bar number _____

Admitted/registered as: ☐ Attorney ☐ In-House Counsel ☐ Foreign Legal Consultant ☐ Other _____

Reason not admitted (if applicable): ☐ Failed exam ☐ Withdrew application ☐ Pending ☐ Denied ☐ Other reason

Explanation _____

Other

8. Have you ever otherwise submitted an application to, or been authorized to practice law in, any U.S. or foreign jurisdiction or tribal court?

Note: In this context, “otherwise” means other than reported in response to questions 1 to 7. Do not list U.S. federal court or pro hac vice admissions in response to this question.

☐ Yes ☐ No

Name of U.S. jurisdiction, tribal court, or foreign jurisdiction _____

Name and address of foreign bar authority _____

Date application made _____ Date examination taken _____

Admission or readmission date (Mo/Day/Yr) _____ Bar number _____

Admitted/registered as: ☐ Attorney ☐ In-House Counsel ☐ Foreign Legal Consultant ☐ Other _____

Reason not admitted (if applicable): ☐ Failed exam ☐ Withdrew application ☐ Pending ☐ Denied ☐ Other reason

Explanation _____

Bar Association Membership

9. List the full name and address of each mandatory or voluntary bar association which you have been or are currently a member.

NOTE: You do not need to report membership when you were a law student.

Bar association _____

Dates of membership: From Mo/Yr _____ To Mo/Yr _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Attorney Discipline

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

If Yes, upload a copy of the associated action or complaint.

☐ Yes ☐ No ☐ Never admitted to practice law

Name of regulatory agency _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Case number (if applicable) _____ Date _____

Action taken _____

Explanation _____

Attorney Complaint

11. Have you ever been the subject of any charges, complaints or grievances (formal or informal) concerning your conduct as an attorney, including any now pending?

If Yes, upload a copy of the associated action or complaint.

☐ Yes ☐ No ☐ Never admitted to practice law

Name of regulatory agency _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Case number (if applicable) _____ Date _____

Action taken _____

Explanation _____

Unauthorized Practice of Law

12. Have you ever been the subject of any charges, complaints, or grievances (formal or informal) alleging that you engaged in the unauthorized practice of law, including any now pending?

If Yes, upload a copy of the associated action or complaint.

☐ Yes ☐ No

Name of regulatory agency _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Case number (if applicable) _____ Date _____

Action taken _____

Explanation _____

Sanction or Disqualification

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

If Yes, upload a copy of the order of sanction or disqualification.

☐ Yes ☐ No ☐ Never admitted to practice law

Name of Court _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Case number _____

Case name _____

Action taken _____

From Mo/Yr _____ To Mo/Yr _____

Explanation _____

EDUCATION

Law Office Study

14. Did you engage in law office study in lieu of receiving a J.D.?

☐ Yes ☐ No

From Mo/Yr _____ To Mo/Yr _____

Name of firm _____

Proctor _____

Firm address _____

City _____ State _____ Zip _____

Law School Attendance

15. List complete information regarding all law school attendance and law degrees (J.D., L.L.B., L.L.M., etc.).

Note: If you studied abroad during law school, complete an entry for each study abroad period. Indicate the sponsoring institution, if different from the school listed.

☐ I have never attended law school

Law School _____

☐ ABA Approved ☐ Non-ABA Approved

Mailing address _____

City _____ State _____ Zip _____

Country _____ Province _____

From _____ To _____

Date degree received or expected (from this school) _____

Degree received or expected to be received (from this school) or No Degree _____

☐ J.D. Degree (from this school)

☐ Full-time student ☐ Part-time student

☐ Check if enrollment was primarily online.

Law School Discipline

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

☐ Yes ☐ No

Name of institution _____

Action taken _____ Date _____

Explanation _____

College/University Attendance

17. List complete information regarding all college/university attendance (other than law school).

Note: If you studied abroad, complete an entry for each study abroad period. Indicate the sponsoring institution, if different from the school listed.

☐ I have never attended a college or university, other than as reported in the law school section.

College _____

Mailing address _____

City _____ State _____ Zip _____

Country _____ Province _____

From _____ To _____

Degree received (No degree, B.A., M.S., etc.) _____ Field of study _____

☐ Check if enrollment was primarily online.

College/University Discipline

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

☐ Yes ☐ No

Name of institution _____

Action taken _____ Date _____

Explanation _____

RESIDENCES

Residence History

19. List every permanent or temporary physical address where you have resided for a period of one month or longer for the last ten years or since age 18, **whichever period of time is shorter**.

■
From Mo/Yr _____ To Mo/Yr _____

Physical address _____

City _____ County/Parish _____ State _____ Zip _____

Country _____ Province _____

■
From Mo/Yr _____ To Mo/Yr _____

Physical address _____

City _____ County/Parish _____ State _____ Zip _____

Country _____ Province _____

■
From Mo/Yr _____ To Mo/Yr _____

Physical address _____

City _____ County/Parish _____ State _____ Zip _____

Country _____ Province _____

■
From Mo/Yr _____ To Mo/Yr _____

Physical address _____

City _____ County/Parish _____ State _____ Zip _____

Country _____ Province _____

EMPLOYMENT

Employment History

20. List all employment and unemployment information for the last ten years or since age 18, **whichever period is shorter**. In addition, **list all law-related employment you have ever had**.

Notes:

Employment - In this context, employment encompasses all part-time and full-time employment, including self-employment, externships, internships (paid and unpaid), clerkships, military service, volunteer work, and temporary employment.

Unemployment - Provide a brief, but specific, description of your activities while unemployed (e.g. seeking employment, preparing for law school, attending <school name>, vacation, studying for bar exam).

Employment References - If an employer is no longer in operation, or you were self-employed or employed by a relative, provide the name and contact information of a verifying reference. **Do not list yourself or a relative as a verifying reference.**

Details - Indicate if the address provided is a company headquarters or if you worked remotely. Provide other information that may assist in verification of this period of employment.

■
From Mo/Yr _____ To PRESENT

Employment position/Description of unemployment _____

Name of supervisor or associate _____

Email of supervisor or associate _____

☐ Email unknown

Employer or firm name _____

Mailing address _____

City _____ State _____ Zip _____

Country _____ Province _____

Employer Phone: _____

☐ Business is defunct

☐ Self-employed or employed by a relative

☐ Business has new name/address

Verifying reference name / Business name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Phone _____ Email _____

Details _____



From Mo/Yr _____ To Mo/Yr _____

Employment position/Description of unemployment _____

Name of supervisor or associate _____

Email of supervisor or associate _____

☐ Email unknown

Reason for Leaving _____

Employer or firm name _____

Mailing address _____

City _____ State _____ Zip _____

Country _____ Province _____

Employer Phone: _____

☐ Business is defunct

☐ Self-employed or employed by a relative

☐ Business has new name/address

Verifying reference name / Business name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Phone _____ Email _____

Details _____



From Mo/Yr _____ To Mo/Yr _____

Employment position/Description of unemployment _____

Name of supervisor or associate _____

Email of supervisor or associate _____

☐ Email unknown

Reason for Leaving _____

Employer or firm name _____

Mailing address _____

City _____ State _____ Zip _____

Country _____ Province _____

Employer Phone: _____

☐ Business is defunct

☐ Self-employed or employed by a relative

☐ Business has new name/address

Verifying reference name / Business name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Phone _____ Email _____

Details _____

■
From Mo/Yr _____ To Mo/Yr _____

Employment position/Description of unemployment _____

Name of supervisor or associate _____

Email of supervisor or associate _____

☐ Email unknown

Reason for Leaving _____

Employer or firm name _____

Mailing address _____

City _____ State _____ Zip _____

Country _____ Province _____

Employer Phone: _____

- ☐ Business is defunct
☐ Self-employed or employed by a relative
☐ Business has new name/address

Verifying reference name / Business name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Phone _____ Email _____

Details _____

Employment Actions

21. Have you ever been disciplined, suspended, laid off, permitted to resign (in lieu of termination), or terminated from any job?

Note: If Yes, any associated periods of employment must be listed in response to the Employment History question before proceeding.

☐ Yes ☐ No

Employer _____

Dates of employment: From Mo/Yr _____ To Mo/Yr _____

Disposition: ☐ Terminated ☐ Suspended ☐ Disciplined ☐ Laid off ☐ Permitted to resign

Date of disposition _____ Explanation of circumstances _____

Judicial Office

22. Have you ever held judicial office?

Office held _____ From Mo/Yr _____ To Mo/Yr _____

Name of court _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Reason for termination (if applicable) _____

Military Service

23. Have you ever been a member of the armed forces of the United States, its reserve components, or the National Guard?

If Yes, upload a copy of all of your military separation papers (DD Form 214 or equivalent). Forms must indicate character of service.

☐ Yes ☐ No

Attach copies of all of your reports of separation (e.g., DD Form 214 – member copy #4, NGB Form 22, etc.). The DD Form 214 that you provide must indicate your character of service.

Choose Branch:

- ☐ Regular Armed Forces – Air Force
- ☐ Regular Armed Forces – Army
- ☐ Regular Armed Forces – Coast Guard
- ☐ Regular Armed Forces – Marine Corps
- ☐ Regular Armed Forces – Navy
- ☐ Reserve Components – Air Force
- ☐ Reserve Components – Army
- ☐ Reserve Components – Coast Guard
- ☐ Reserve Components – Marine Corps
- ☐ Reserve Components – Navy
- ☐ National Guard – Air Force
- ☐ National Guard - Army

State for National Guard service _____

Serial number _____ Rank _____

Dates of service: From Mo/Yr _____ To Mo/Yr _____

Present duty station _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone _____

Name of commanding officer _____

(1). Were you ever court-martialed?

☐ Yes ☐ No

Date of action _____

Explanation of circumstances _____

Result, including any punishment _____

(2). Were you ever awarded non-judicial punishment (Art. 15 UCMJ)?

☐ Yes ☐ No

Date of action _____

Explanation of circumstances _____

Result, including any punishment _____

(3). Did you receive an honorable discharge?

☐ Yes ☐ No

Date of action _____

Explanation of circumstances _____

Result, including any punishment _____

(4). Were you allowed to resign in lieu of court-martial?

☐ Yes ☐ No

Date of action _____

Explanation of circumstances _____

Result, including any punishment _____

(5). Were you administratively discharged?

☐ Yes ☐ No

Date of action _____

Explanation of circumstances _____

Result, including any punishment _____

Licenses

24. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, trade, or profession, other than as an attorney-at-law?

☐ Yes ☐ No

Type of license _____

Issued to (include business name, if applicable) _____

Current status of license _____

License number (if applicable) _____

Application date (Mo/Yr) _____

Expiration/Inactive date (Mo/Yr) _____

Issuing authority _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone _____

License Denial/Revocation

25. Have you ever been denied a license or had a license revoked for a business, trade, or profession?

☐ Yes ☐ No

License _____ Action taken: ☐ Denial ☐ Revocation

Name of regulatory agency _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Action Date _____

Explanation _____

CHARACTER & FITNESS

Professional Discipline

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

If Yes, upload a copy of the associated action or complaint.

☐ Yes ☐ No

Name of regulatory agency _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Case number (if applicable) _____

Action taken _____ Date _____

Explanation _____

Professional Complaint

27. Have you ever been the subject of any charges, complaints, or grievances (formal or informal) concerning your conduct as a member of any other profession, or as a holder of public office, including any now pending?

If Yes, upload a copy of the associated action or complaint.

☐ Yes ☐ No

Name of regulatory agency _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Case number (if applicable) _____

Action taken _____ Date _____

Explanation _____

Conduct or Behavior

28. 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?

☐ Yes ☐ No

Explanation _____

Relevant dates _____

Condition or Impairment

29. The purpose of this inquiry is to allow jurisdictions to determine the current fitness of an applicant to practice law. The mere fact of treatment, monitoring, or participation in a support group is not, in itself, a basis on which admission is denied; jurisdictions' bar admission agencies routinely certify for admission individuals who demonstrate personal responsibility and maturity in dealing with fitness issues. The National Conference of Bar Examiners encourages applicants who may benefit from assistance to seek it.

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, ethical, and professional manner?

Note: In this context, "currently" means recently enough that the condition or impairment could reasonably affect your ability to function as a lawyer.

☐ Yes ☐ No

Are the limitations caused by your condition or impairment reduced or ameliorated because you receive ongoing treatment or because you participate in a monitoring or support program?

☐ Yes ☐ No

Service provided: From Mo/Yr _____ To Mo/Yr _____

Describe the condition or impairment _____

Describe any treatment, or any program that includes monitoring or support _____

■ **Name of attending physician or counselor (if applicable)** _____

Address _____

City _____ **State** _____ **Zip** _____

Country _____ **Province** _____

Phone _____

■ **Name of hospital or institution (if applicable)** _____

Address _____

City _____ **State** _____ **Zip** _____

Country _____ **Province** _____

Phone _____

LEGAL PROCEEDINGS

Civil Action

30. Have you ever been a named party to any civil action?

Note: Family law matters (including divorce actions and continuing orders for child support) should be included here.

If Yes, upload a copy of the associated pleadings, judgments, final orders, settlement agreement and/or docket report.

☐ Yes ☐ No

Complete title of action _____

Court file number _____

Date filed _____

Trial date _____ Date of final disposition _____

Disposition _____

Are you the subject of any continuing court order (e.g., for child support or payment of a money judgment)?

☐ Yes ☐ No

If the disposition resulted in a judgment, has the judgment been satisfied?

☐ Yes ☐ No

Date satisfied _____

Amount still owing _____

Detailed explanation of suit _____

Name of court _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Plaintiff's name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Name of plaintiff's attorney _____

Defendant's name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Name of defendant's attorney _____

Administrative Action

31. Have you ever had a complaint or action (including, but not limited to, allegations of fraud, deceit, misrepresentation, forgery, or malpractice) initiated against you in any administrative forum?

If Yes, upload a copy of the associated administrative record.

☐ Yes ☐ No

Date action/complaint initiated _____

Name of administrative forum or body _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Name of investigative agency _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Date of final disposition _____

Disposition _____

Detailed explanation _____

Criminal Action

32. Have you ever been cited for, arrested for, charged with, or convicted of any violation of any law other than a case that was resolved in juvenile court?

Note: Include matters that have been dismissed, expunged, subject to a diversion or deferred prosecution program, or otherwise set aside. Omit traffic violations.

If Yes, upload a copy of the associated arrest report, complaint, indictment, citation, information, disposition, sentence, docket report, and appeal, if any.

☐ Yes ☐ No

Date (or time period) of incident _____

Incident location (city, county, state) _____

Country _____ Province _____

Title of complaint, indictment, or citation _____

Court file number _____

Detailed description of violation _____

Name of court involved _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Name of law enforcement agency involved _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Attorney name _____

Date of initial court hearing _____

Charge(s) at time of initial court hearing _____

Date of final disposition _____

Charge(s) at time of final disposition _____

Final disposition _____

Alcohol or Drug Related Traffic Violation

33. Have you ever been cited for, arrested for, charged with, or convicted of any alcohol or drug related traffic violation other than a violation that was resolved in juvenile court?

Note: Include matters that have been dismissed, expunged, subject to a diversion or deferred prosecution program, or otherwise set aside.

If Yes, upload a copy of the associated arrest report, complaint, indictment, citation, information, disposition, sentence, docket report, and appeal, if any.

☐ Yes ☐ No

Date (or time period) of incident _____

Incident location (city, county, state) _____

Country _____ Province _____

Title of complaint, indictment, or citation _____

Court file number _____

Detailed description of violation _____

Name of court involved _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Name of law enforcement agency involved _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Attorney name _____

Date of initial court hearing _____

Charge(s) at time of initial court hearing _____

Date of final disposition _____

Charge(s) at time of final disposition _____

Final disposition _____

Traffic Violation

34. Have you been cited for, arrested for, charged with, or convicted of any moving traffic violation during the past ten years?

Note: Include matters that have been dismissed, expunged, subject to a diversion or deferred prosecution program, or otherwise set aside. Omit parking violations.

☐ Yes ☐ No

■
Date of violation (Mo/Yr) _____

Charge(s) at time of final disposition _____

Final disposition _____

Description of violation _____

Name of law enforcement agency _____

Violation location (city, county, state) _____

Country _____ Province _____

■
Date of violation (Mo/Yr) _____

Charge(s) at time of final disposition _____

Final disposition _____

Description of violation _____

Name of law enforcement agency _____

Violation location (city, county, state) _____

Country _____ Province _____

■
Date of violation (Mo/Yr) _____

Charge(s) at time of final disposition _____

Final disposition _____

Description of violation _____

Name of law enforcement agency _____

Violation location (city, county, state) _____

Country _____ Province _____

Driver's License

35. List all driver's licenses held during the last ten years.

☐ I have not had a driver's license during the last ten years.

■ Driver's License state, province, or country _____

Driver's License number (if unavailable, enter "unknown") _____

☐ Current

■ Driver's License state, province, or country _____

Driver's License number (if unavailable, enter "unknown") _____

☐ Current

■ Driver's License state, province, or country _____

Driver's License number (if unavailable, enter "unknown") _____

☐ Current

FINANCIAL RESPONSIBILITY

Revocation

36. Have you ever had a credit card or charge account revoked that was not resolved in bankruptcy?

If Yes, upload a statement from each applicable creditor showing proof of payment or current balance.

☐ Yes ☐ No

Type of debt: ☐ Charge account ☐ Credit card

Last four digits of account number _____ Original amount of debt _____

Current balance _____ Date of last payment _____

☐ No Payments Made

Current status of this debt _____

Describe the history of this debt _____

Name of entity extending credit _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone Number _____

Name of retailer if different from above _____

☐ Check if name or address of current creditor or collection agency is different from above.

Name of current creditor or collection agency if different from above _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone _____

Last four digits of current account number _____

Defaulted Student Loan

37. Have you ever defaulted on a student loan?

If Yes, upload a statement from each applicable creditor showing proof of payment or current balance.

☐ Yes ☐ No

Full account number _____ Original amount of debt _____

Current balance _____ Date of last payment _____

☐ No Payments Made

Current status of this debt _____

Describe the history of this debt _____

Name of entity extending credit _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone Number _____

☐ Check if name or address of current creditor or collection agency is different from above.

Name of current creditor or collection agency if different from above _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone Number _____

Current account number _____

Other Defaulted Debt

38. Have you ever defaulted on any debt other than a student loan that was not resolved in bankruptcy?

If Yes, upload a statement from each applicable creditor showing proof of payment or current balance.

☐ Yes ☐ No

Type of debt: ☐ Charge account** ☐ Credit card** ☐ Property/real estate assessment*

☐ Utility/Telephone* ☐ Other _____

(*Last four digits of) Account number _____ Original amount of debt _____

Current balance _____ Date of last payment _____

☐ No Payments Made

Current status of this debt _____

Describe the history of this debt (if this is a medical debt, include date of service and institution name) _____

Name of entity extending credit _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone Number _____

Name of retailer if different from above _____

☐ Check if name or address of current creditor or collection agency is different from above.

Name of current creditor or collection agency if different from above _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone Number _____

Current account number _____

*** For real estate and utility/telephone debt, provide address of property/telephone associated with debt:**

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Past Due Debt

39. Have you had any debt that has been more than 120 days past due within the past three years that was not resolved in bankruptcy?

If Yes, upload a statement from each applicable creditor showing proof of payment or current balance.

☐ Yes ☐ No

Type of debt: ☐ Charge account ☐ Credit card** ☐ Property/real estate assessment* ☐ Student loan

☐ Utility/Telephone* ☐ Other _____

(**Last four digits of) Account number _____ Original amount of debt _____

Current balance _____ Date of last payment _____

☐ No Payments Made

Current status of this debt _____

Describe the history of this debt (if this is a medical debt, include date of service and institution name) _____

Name of entity extending credit _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone Number _____

Name of retailer if different from above _____

☐ Check if name or address of current creditor or collection agency is different from above.

Name of current creditor or collection agency if different from above _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone Number _____

Current account number _____

* For real estate and utility/telephone debt, provide address of property/telephone associated with debt:

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone Number _____

Tax Debt

40. Have you ever failed to timely pay any personal taxes due, including but not limited to any federal or state income taxes; state, county or municipal private property taxes; or real estate assessment taxes?

If **Yes**, upload a copy of supporting documentation (IRS tax account transcript, release of lien, statement of amount due, etc.).

☐ Yes ☐ No

Type of debt: ☐ Income ☐ Property/Real Estate Assessment ☐ Other _____

Full account number _____ Original amount of debt _____

Current balance _____ Date of last payment _____

☐ No Payments Made

Current status of this debt _____

Describe the History of This Debt (include applicable tax year(s)) _____

Name of agency _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Telephone Number _____

Bankruptcy

41. Have you ever filed a petition for bankruptcy?

If Yes, upload associated schedule of indebtedness, petition for bankruptcy, docket report and discharge from bankruptcy order.

☐ Yes ☐ No

Date filed _____ Title of action _____

Type of bankruptcy _____

Court file number _____

Name of court involved _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Total amount discharged in U.S. dollars _____

Date of disposition _____

Disposition _____

Were any adversary proceedings instituted? ☐ Yes ☐ No

Were there any allegations of fraud? ☐ Yes ☐ No

Were any debts not discharged? ☐ Yes ☐ No

Detailed description of circumstances surrounding filing _____

CHARACTER REFERENCES

References

42. Provide complete information for at least six references, preferably persons who have known you for a minimum of five years. You are encouraged to include one reference from every locality where you have lived during the last ten years.

Do not list yourself, anyone who is related to you by blood or marriage, or anyone who resides at your current residential address.

Do not use names listed in response to the Employment History question. If you provide a business address, please include the names of both the reference and the business.

Note: To avoid delays, provide current contact information (**email address, mailing address, and telephone**) for each reference.

■ Name _____

Business name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Phone _____ Email _____

☐ Email Unknown

Occupation _____ Years known _____

■ Name _____

Business name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Phone _____ Email _____

☐ Email Unknown

Occupation _____ Years known _____

■
Name _____

Business name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Phone _____ Email _____

☐ Email Unknown

Occupation _____ Years known _____

■
Name _____

Business name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Phone _____ Email _____

☐ Email Unknown

Occupation _____ Years known _____

■
Name _____

Business name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Phone _____ Email _____

☐ Email Unknown

Occupation _____ Years known _____

■

Name _____

Business name _____

Address _____

City _____ State _____ Zip _____

Country _____ Province _____

Phone _____ Email _____

☐ Email Unknown

Occupation _____ Years known _____

ADDITIONAL INFORMATION

Additional Information

43. Would you like to provide additional information or further explain any of your previous responses? If you provide further explanation to any of your previous responses, please include the associated question number.

☐ Yes ☐ No

Additional information _____

Further explanation(s) _____

<div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>

JURISDICTION SPECIFIC QUESTIONS
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<i>Rhode Island Preamble</i>

The following questions are specific to applicants seeking admission to the Rhode Island Bar; any inquiries about the questions should be directed to the Rhode Island Committee on Character and Fitness. Applicants are required to answer all questions in full.

<i>RI-1 Selective Service</i>

Did you register under any Selective Service Act? <ul style="list-style-type: none">• If No, state reason (e.g., female and not required).• If Yes, please provide the city, county, and state where registered.

<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> <div></div> <div></div>
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<i>RI-2 Stock Holdings</i>

Do you currently own or have you ever owned 10% or more of capital stock or other property interest, either legally or equitably, in any business venture including, but not limited to, a corporation; land, business or trust; limited or general partnership or joint venture; nonprofit corporation or general partnership or joint venture; nonprofit corporation or general association; or any business association trading or holding property in a name which appear to be the name of a corporation or limited partnership?

If Yes , please provide the name and full address (street name, city/town, state, zip) for each entity.
--

<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> <div></div> <div></div>
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<i>RI-3 Business Ventures</i>

Are you currently or have ever been an officer, director, or trustee of any business venture, including, but not limited to, a corporation; land, business or trust; limited or general partnership or joint venture; nonprofit corporation or association; or any business association trading under a name which might appear to be a corporation?
--

If Yes , please provide the name and full address (street name, city/town, state, zip) for each entity.
--

<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>
--

<div></div> <div></div> <div></div>
RI-4 Business Venture Civil Cases
Have any of the entities listed previously been involved in litigation or other proceedings (including every cease and desist order, or other order) in any court of law or equity or any criminal court or before any government board or agency, or any arbitration board (a) during the period of time in which you owned 10% or more of the capital stock or other property interest in any said entity listed above or (b) during the period of time in which you were an officer, director or trustee, managing or general partner of any said entity listed above?
If Yes, please provide the following information about each proceeding: <i>name of the entity, case number, date of filing, court/agency involved, type of proceeding, plaintiff name, defendant name, and disposition.</i>
<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> <div></div> <div></div>
RI-5 Business Venture Unpaid Judgments
Are any judgments, liens, orders and decrees which have entered against any entity listed previously unsatisfied as of the present date?
If Yes, please provide the following information about each proceeding: <i>name of the entity, case number, date of filing, court/agency involved, type of proceeding, plaintiff name, defendant name, and disposition.</i>
<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> <div></div> <div></div>
RI-6 Guardianship/Conservatorship
During your adulthood, have you ever been placed under guardianship or conservatorship in any legal proceeding?
If Yes, please provide a detailed explanation for each occurrence.
<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> <div></div> <div></div>
RI-7 Federal Court Admission
Have you ever submitted an application, applied for admission, or been admitted, licensed, or authorized to practice law in the U.S. federal courts?
If Yes, please provide information below for <i>each</i> occurrence: <ul style="list-style-type: none">If not admitted: <i>the name of U.S. federal court, the date the application was made (mm/dd/yyyy), the reason not admitted (withdrew application, pending, denied, or other reason) and an explanation of the circumstances as to why you were not admitted.</i>

- **If admitted:** *the name of U.S. federal court, the date the application was made (mm/dd/yyyy), the admission/readmission date (mm/dd/yyyy), bar number, and in what capacity you were admitted (attorney, in-house counsel, foreign legal consultant, or other).*

☐ Yes ☐ No

RI-8 Bar Reviews

In connection with your any prior or current application for admission to practice law, were you required to appear before any board, committee, or other examining authority for examination or inquiry about any matter, other than on examination upon legal subjects?

If Yes, list the name and address of any such authority and the reason for the appearance.

☐ Yes ☐ No

RI-9 Bar Examination Conduct

Have you ever been accused of, or charged with or the subject of an investigation regarding fraud, dishonesty or other misconduct in connection with the administration of a bar examination in any other jurisdiction?

If Yes:

- Include a statement below setting forth the jurisdiction, date(s) of incident, explanation of the circumstances, the stage of proceedings, the disposition, and any penalties imposed, for each matter.
- Upload a copy of the associated record.

☐ Yes ☐ No

RI-10 Legal Employment

For any law-related positions (e.g., Law Clerk, Associate, Counsel, Contract Attorney) disclosed in an answer to NCBE Question 20 – Employment History, describe your job responsibilities and identify the specific geographic locations of the offices and jurisdictions from which you conducted your activities.
