JURISDICTION			
Application to			
Rhode Island			
Annlying as			
Applying as			
☐ Admission by Trans	ferred UBE Score (Rule 1B)		
☐ Admission on Exam			
☐ Attorney Admission	n on Examination (Rule 2(a))		
PERSONAL INFO	OPMATION		
Applicant Inform	ation		
Nume			
First	Middle	Last	Suffix
NCDE Number			
NCBE Number			
Social Security Numb	per		
Date of birth			
Date of birtii			
Month		Day	Year
_ ,, ,,			
Email address			
Email Address			
Linaii Address			
Alternate Email Addre	ess		
Sex			
☐ Female ☐ Male	□ Prefer not to answer		
Place of birth			
ridee of birth			
City		State	
Country	_		
Citizenship			
Country of citizenship	)		

RHODE ISLAND Revised 04/19/2022

If you are not a citizen of the United States, what is yo date)?	our immigration status (include visa	a type if applicable and expiration
Names		
Have you ever used or been known by a different r	name?	
<b>Note</b> : Your name(s) will be used for identification in references, etc.	n correspondence sent to schoo	ls, employers, courts,
□ Yes □ No		
First Middle	Last	Suffix
From Mo/Yr To Mo/Yr		
Reason for change (Describe how and why you used the	his name, marriage or divorce, e.g.	
Contact Information		
Please provide the mailing address and telephone months.	numbers at which you can be re	ached during the next six
If business, name of firm		
Address (D.O. Davi		
Address/P.O. Box		
City	State	Zip
Country	Province	
	_ FIOVIIICE	
Mobile or Home Phone	<i>y</i>	
Office Phone		
APPLICATIONS, AUTHORIZATIONS AN	ID CONDUCT	
Law Student Posiciration		
<ul><li>Law Student Registration</li><li>1. Have you ever submitted an application to register as</li></ul>	s a law student?	
1. Have you ever submitted an application to register as	sa law stadent.	
Note: This question refers to jurisdiction sponsored law	student registration programs (no	t law school 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)?
<b>Note</b> : 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)
Admitted/registered as:   Attorney   In-House Counsel   Foreign Legal Consultant   Other   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   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)

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   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?
<b>Note:</b> 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

RHODE ISLAND

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 members	ship 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, suspend	ded, censured, or otherwise reprimanded	or disqualified as an attorney?
If Yes, upload a copy of the associated action	on or complaint.	
☐ Yes ☐ No ☐ Never admitted to	o 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 as an attorney, including any now pending?		or informal) concerning your conduct
If Yes, upload a copy of the associated action	on or complaint.	
☐ Yes ☐ No ☐ Never admitted to	o 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 grieval in the unauthorized practice of law, including any now pending?	nnces (formal or informal) alleging that you engaged
If Yes, upload a copy of the associated action or complaint.	
□ Yes □ No	
Name of regulatory agency	
Address	
City	StateZip
Country Province	
Case number (if applicable)	
Action taken	
Explanation	
Canation or Disqualification	
Sanction or Disqualification  13. Have sanctions ever been entered against you, or have you ever bee	n 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	ce
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	ng a J.D.?	
□ Yes □ No		
From Mo/Yr	_ To Mo/Yr	
Name of firm		
Proctor		
Firm address		
City	State	Zip
Law School Attendance		
Note: If you studied abroad during law school, complet institution, if different from the school listed.  □ I have never attended law school  Law School  □ ABA Approved □ Non-ABA Approved  Mailing address	e an entry for each study abro	ad period. Indicate the sponsoring
City	State	Zip
Country	Province	
From	То	
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 s	cholastic or disciplinary probation, expelled, requested to
resign, allowed to resign in lieu of discipline, otherwise subjected to	o 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 atter	ndance (other than law school).
<b>Note:</b> If you studied abroad, complete an entry for each study ab	road period. Indicate the sponsoring institution, if
different from the school listed.	
☐ I have never attended a college or university, other than as rep	orted in the law school section.
C. H	
College	
Mailing address	
Mailing address	
CityState	Zip
State	
Country	Province
FromT	0
Degree received (No degree, B.A., M.S., etc.)	ield of study
	·
☐ Check if enrollment was primarily online.	
College/University Discipline	
18. Have you ever been dropped, suspended, warned, placed on se	cholastic or disciplinary probation, expelled, requested to
resign, allowed to resign in lieu of discipline, otherwise subjected	
studies by any college or university?	
□ Yes □ No	
Name of institution	
Action taken	Date
	<del></del> -
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 \_\_\_\_\_ City \_\_\_\_\_ County/Parish \_\_\_\_ State \_\_\_ Zip \_\_\_ Country \_\_\_\_\_ Province \_\_\_\_\_ From Mo/Yr \_\_\_\_\_\_ To Mo/Yr \_\_\_\_\_ City \_\_\_\_\_ County/Parish \_\_\_\_ State \_\_\_ Zip \_\_\_\_ Country \_\_\_\_\_ Province \_\_\_\_\_ From Mo/Yr \_\_\_\_\_\_To Mo/Yr \_\_\_\_\_ Physical address \_\_\_\_\_ \_\_\_\_\_ County/Parish\_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_\_ Province \_\_\_\_\_ \_\_\_\_\_To Mo/Yr \_\_\_\_\_ From 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, <b>whichever period is shorter</b> . 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.
Harman Duride a brief but an eific description of any orbitishes while an england (a problem and business)
<b>Unemployment</b> - Provide a brief, but specific, description of your activities while unemployed (e.g. seeking employment, preparing for law school, attending <i><school name=""></school></i> , vacation, studying for bar exam).
preparing for law school, attending (school nume), vacation, studying for bar examp.
<b>Employment References</b> - 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. <b>Do not list yourself or a relative as a verifying</b>
reference.
<b>Details</b> - 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
Name of supervisor of associate
Email of supervisor or associate
□ Email unknown
Employer or firm name
Mailing address
ividilitig address
City State Zip
· <del></del>
Country Province
Telephone
□ Business is defunct
□ Self-employed or employed by a relative
□ Business has new name/address
Verifying reference name / Business name
Address

\_\_\_\_\_\_State \_\_\_\_\_\_Zip \_\_\_\_\_\_

Province \_\_\_\_

City \_\_\_\_

Country \_

•	E-mail
etails	
rom Mo/Yr	To Mo/Yr
mployment position/Description of unemployment	
lame of supervisor or associate	
mail of supervisor or associate	
□ Email unknown	
Reason for Leaving	
imployer or firm name	
Nailing address	
City	State Zip
Country	Province
Telephone	
Business is defunct	
Business is defunct Self-employed or employed by a relative	
□ Business is defunct □ Self-employed or employed by a relative □ Business has new name/address	
Business is defunct Self-employed or employed by a relative Business has new name/address Verifying reference name / Business name	
Business is defunct Self-employed or employed by a relative Business has new name/address Verifying reference name / Business name	State Zip
Business is defunct Self-employed or employed by a relative Business has new name/address Verifying reference name / Business name	StateZip
Business is defunct Self-employed or employed by a relative Business has new name/address Verifying reference name / Business name	
Business is defunct Self-employed or employed by a relative Business has new name/address Verifying reference name / Business name Address City Country	
Business is defunct Self-employed or employed by a relative Business has new name/address  /erifying reference name / Business name  Address  City  Country  Felephone	Province
Business is defunct Self-employed or employed by a relative Business has new name/address  /erifying reference name / Business name  Address  City  Country  Felephone	Province
Business is defunct Self-employed or employed by a relative Business has new name/address Verifying reference name / Business name Address City Country	Province

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	StateZip
Country	Province
Telephone	
<ul> <li>□ Business is defunct</li> <li>□ Self-employed or employed by a relative</li> <li>□ Business has new name/address</li> </ul>	
Verifying reference name / Business name	
Address	
City	_ State Zip
Country	Province
Telephone	_ E-mail
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	
Telephone		
<ul> <li>□ Business is defunct</li> <li>□ Self-employed or employed by a relative</li> <li>□ Business has new name/address</li> </ul>		
Verifying reference name / Business name		
Address		
City	State	Zip
Country	Province	
Telephone	E-mail	
Details		
Employment Actions		
21. Have you ever been disciplined, suspended, I job?	aid off, permitted to resign (in lieu o	of termination), or terminated from any
<b>Note</b> : If Yes, any associated periods of employme proceeding.	ent must be listed in response to the	Employment History question before
☐ Yes ☐ No Employer		
Dates of employment: From Mo/Yr	То	Mo/Yr
Disposition: ☐ Terminated ☐ Suspended ☐	□ Disciplined □ Laid off □ Perm	nitted to resign
Date of disposition	Explanation of circumstances	

Judicial Office			
22. Have you ever held	judicial office?		
Office held	Fro	om Mo/Yr	_ To Mo/Yr
Name of court			
Address			
City		State	7in
•			
Country		Province	
Reason for terminatio	n (if applicable)		
Military Service			
	n a member of the armed forces of th	e United States, its reserve	components, or the National Guard?
If Yes, upload a copy o service.	f all of your military separation paper	s (DD Form 214 or equivaler	nt). Forms must indicate character of
□ Yes □ No			
	your reports of separation (e.g., DD nust indicate your character of servi		4, NGB Form 22, etc.). The DD Form
Choose Branch:	<ul> <li>□ Regular Armed Forces – Air Force</li> <li>□ Regular Armed Forces – Coast Ge</li> <li>□ Regular Armed Forces – Marine</li> <li>□ Regular Armed Forces – Marine</li> <li>□ Regular Armed Forces – Navy</li> <li>□ Reserve Components – Air Force</li> <li>□ Reserve Components – Army</li> <li>□ Reserve Components – Coast Ge</li> <li>□ Reserve Components – Marine Ce</li> <li>□ Reserve Components – Navy</li> <li>□ National Guard – Air Force</li> <li>□ National Guard – Army</li> </ul>	uard Corps ard orps	
State for National Gua	rd service		
Serial number	<u> </u>	Rank	
Dates of service: From	ı Mo/Yr	To Mo/Yr	
Present duty station _			
Address			

City	State	Zip
Country	Provinc	e
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 punishme	ent (Art. 15 UCMJ)?	
Date of action		
Explanation of circumstances		<u> </u>
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-ma		

Yes □ No
te of action
planation of circumstances
sult, including any punishment
. Were you administratively discharged?
Yes □ No
te of action
planation of circumstances
sult, including any punishment
censes
censes  . Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, ide, or profession, other than as an attorney-at-law?
. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business,
. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, ide, or profession, other than as an attorney-at-law?
. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, ide, or profession, other than as an attorney-at-law?  Yes   No
. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, ide, or profession, other than as an attorney-at-law?  Yes   No  pe of license
. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, ide, or profession, other than as an attorney-at-law?  Yes □ No  pe of license  ued to (include business name, if applicable)
. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, ide, or profession, other than as an attorney-at-law?  Yes □ No  pe of license  ued to (include business name, if applicable)  rrent status of license
. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, ide, or profession, other than as an attorney-at-law?  Yes
. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, ide, or profession, other than as an attorney-at-law?  Yes
. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, ide, or profession, other than as an attorney-at-law?  Yes
. Have you ever applied for a license (even if the application was subsequently withdrawn) or held a license for a business, ide, or profession, other than as an attorney-at-law?  Yes

Telephone	
License Denial/Revocation	
25. Have you ever been denied a license or had a license revoke	d 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 repr or as a holder of public office?	imanded or disqualified as a member of another profession,
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, as a member of any other profession, or as a holder of public of		· · · · · · · · · · · · · · · · · · ·
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	X Z	
28. Within the past five years, have you exhibited any conduct practice law in a competent, ethical, and professional manner?		nto question your ability to
□ Yes □ No		
Explanation		
Relevant dates		
Condition or Impairment		
29. The purpose of this inquiry is to allow jurisdictions to determine fact of treatment, monitoring, or participation in a suppositurisdictions' bar admission agencies routinely certify for admission maturity in dealing with fitness issues. The National Conference from assistance to seek it.	rt group is not, in itself, a bo sion individuals who demon	asis on which admission is denied; strate personal responsibility and

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,

RHODE ISLAND Revised 04/19/2022

ethical, and professional manner?

<b>Note</b> : In this context, "currently" means recently enough that ability to function as a lawyer.	the condition or impairment could reaso	onably affect your
□ Yes □ No		
Are the limitations caused by your condition or impairment treatment or because you participate in a monitoring or sup		ceive ongoing
□ Yes □ No		
Service provided: From Mo/Yr	To Mo/Yr	
Describe the condition or impairment		
Describe any treatment, or any program that includes monit	oring or support	
■ Name of attending physician or counselor (if applicable)		
Address		
City	State Zip _	
Country	Province	
Telephone		
Name of hospital or institution (if applicable)		
Address		
City	State Zip _	
Country	Province	
Telephone		
LEGAL PROCEEDINGS		
Civil Action		
30. Have you ever been a named party to any civil action?		
Note: Family law matters (including divorce actions and conti		
If Yes, upload a copy of the associated pleadings, judgments,	final orders, settlement agreement and/	or docket report.

□ Yes	□ No	
Complete	e title of action	
Court file	number	
Date filed	d	
Trial date	Date of final di	sposition
Dispositio	on	
Are you t	the subject of any continuing court order (e.g., for child suppo	rt or payment of a money judgment)?
□ Yes	□ No	
If the disp	position resulted in a judgment, has the judgment been satisfi	ed?
□ Yes	□ No	
Date satis	sfied	
Amount s	still owing	
Detailed 6	explanation of suit	
Name of	court	
	court	
		Zip
		Province
-	s name	
City	State	Zip
Country _		Province
Name of	plaintiff's attorney	
Defendan	nt'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, forgery, or malpractice) initiated against you in any adm	· · · · · · · · · · · · · · · · · · ·	ns of fraud, deceit, misrepresentation,
If Yes, upload a copy of the associated administrative re	ecord.	
□ Yes □ No		
Date action/complaint initiated		
Name of administrative forum or body		
Address		
City	State	Zip
Country		
		_
Name of investigative agency		
Address		
City	State	Zip
Country	Province _	
Date of final disposition		
<b>Disposition</b>		
Detailed explanation		
Criminal Action		
32. Have you ever been cited for, arrested for, charged was resolved in juvenile court?	with, or convicted of any vio	plation of any law other than a case that
<b>Note:</b> Include matters that have been dismissed, expunotherwise set aside. Omit traffic violations.	ged, subject to a diversion c	or deferred prosecution program, or

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	StateZip
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 other than a violation that was resolved in juvenile court?	convicted of any alcohol or drug related traffic violation

**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	StateZip
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 convi	icted of any moving traffic violation during the past ten

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)
CountryProvince
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 revoke	d that was not resolved in bankruptcy?
□ Yes □ No	
Type of debt: ☐ Charge account ☐ Credit card	
Last four digits of account numberOrig	rinal amount of debt
Current balance Date	e of last payment
□ No Payments Made	
Current status of this debt	<u> </u>
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 colle	ection agency is different from above	
Name of current creditor or collection agency if differ	ent from above	
Address		
City	State	Zip
Country	Province	
Telephone number		
Last four digits of current account number		
Defaulted Student Loan		
37. Have you ever defaulted on a student loan?		
□ 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 colle	ection agency is different from above	
Name of current creditor or collection agency if different	ent 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 resolv	ved in bankruptcy?
□ Yes □ No		
Type of debt: ☐ Charge account** ☐ Credit card	**   Property/real estate asses	ssment*
☐ Utility/Telephone* ☐ Other		
(*Last four digits of) Account number	Original amount of c	lebt
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	l 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 co	ollection agency is different from	above.
Name of current creditor or collection agency if diff	erent from above	
Address		
City	State	7in

Country	Province	_
Telephone number		
Current account number		
* For real estate and utility/telephone debt, pro	vide address of property/telephone r	number associated with debt:
Address		
City	State	Zip
Country	Province	
Past Due Debt		
39. Have you had any debt that has been more th bankruptcy?	nan 120 days past due within the past	three years that was not resolved in
□ Yes □ No		
Type of debt: ☐ Charge account ☐ Credit card	d**   Property/real estate assessm	ent* □ Student loan
☐ Utility/Telephone* ☐ Other		
(**Last four digits of) Account number	Original amount of de	ebt
Current balance	Date of last payment	
□ No Payments Made		
Current status of this debt		
Describe the history of this debt (if this is a medi	ical debt, include date of service and	institution name)
Name of entity extending credit		<u>.</u>
Address		
City	State	Zip
Country	Province	
Telephone number		
Name of retailer if different from above		
☐ Check if name or address of current creditor o	r collection agency is different from a	bove.

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 o	f property/telephone number	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, in state, county or municipal private property taxes; or real estate		federal or state income taxes;
If yes, upload a copy of supporting documentation (IRS tax accoetc.).	unt transcript, release of lien,	statement of amount due,
□ Yes □ No		
Type of debt: ☐ Income ☐ Property/Real Estate Assessmen	t 🗆 Other	
Full account number Origina	al amount of debt	
Current balance Date o	f 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?				
<b>If Yes,</b> upload associated schedule of indebtedness order.	s, petition	for bankrup	tcy, docket re	eport and discharge from bankruptcy
□ 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 surroundin	g filing			

## **CHARACTER REFERENCES**

References		
42. Provide complete information for at least six references, years. You are encouraged to include one reference from every		
Do not list yourself, anyone who is related to you by blood or address.	r marriage, or anyone	who resides at your current residential
Do not use names listed in response to the Employment Hist the names of both the reference and the business.	ory question. If you p	rovide a business address, please include
<b>Note:</b> To avoid delays, provide current contact information (each reference.	email address, mailin	g address, and telephone number) for
■ Name		
Business name		
Address		
City	State	Zip
Country	Province	·
TelephoneE-m	ail	
□ Email Unknown		
Occupation	,	ears known
Name		
Business name		
Address		
City	State	Zip
Country	Province	
TelephoneE-m	ail	
□ Email Unknown		
Occupation		Years known
_		

Name \_\_

Business name		
Address		
City	State	Zip
Country	Province	
Telephone	E-mail	
□ Email Unknown		
Occupation	Years know	wn
■ Name		
Business name		
Address		
City	State	Zip
Country	Province	
Telephone	E-mail	
□ Email Unknown		
Occupation	Years know	wn
■ Name		
Business name		
Address		
City	State	Zip
Country	Province	
Telephone	E-mail	
□ Email Unknown		
Occupation	Years know	wn
Name		

Business name			
Address			
City	State	Zip	
Country	Province		
Telephone	E-mail		
□ Email Unknown			
Occupation	Y	ears known	
ADDITIONAL INFORMATION			
Additional Information			
43. Would you like to provide additional informatio further explanation to any of your previous response			? If you provide
□ Yes □ No			
Additional information			
Further explanation(s)			

JURISDICTION SPECIFIC QUESTIONS
JUNISDICTION SPECIFIC QUESTIONS
Rhode Island Preamble
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.
·
RI-1 AKA(s)
Have you ever used or been known by any other name including nicknames? Please state below any nicknames
you have used.
□ Yes □ No
RI-2.1 Father's Name
Father's name
Tablet 3 fiding
RI-2.2 Father's Residence
Is he living?
If you list weepent of these
If yes, list present address.
□ Yes □ No
RI-2.3 Mother's Name
Mother's Name
RI-2.4 Mother's Residence
Is she living?
If yes, list present address.

RHODE ISLAND Revised 04/19/2022

□ Yes □ No
DI 2 Cibling Information
RI-3 Sibling Information List your siblings and their present address(es):
List your sibilings and their present address(es).
RI-4.1 Current Marital Status
Your current marital status: (Single/Married/Divorced/Separated) and, if applicable, provide Date and Place of
Marriage and full name of spouse:
RI-4.2 Separation Legal Proceedings
If living apart from your spouse, has your separation been the subject of legal proceedings? If yes, list the names and addresses of all attorneys who participated; the names of the parties to such proceedings, and the
names and addresses of the courts in which the proceedings were instituted or maintained.
□ Yes □ No
RI-4.3 Prior Marriages
Except as stated previously, have you ever been married? If yes, provide date of prior marriage, name of prior
spouse and how marriage terminated.
□ Yes □ No
RI-5 Alimony/Support
Were you required to pay support or alimony payments?
If yes, list the name and last known address of your former spouse(s) and status of your compliance with the support or alimony order.
□ Yes □ No

Di Ciliab Cabaal Attandamaa
RI-6 High School Attendance
List complete information regarding your high school attendance in reverse chronological order. Include your
dates of attendance (from month/year to month/year) and high school(s) name and complete address.
RI-7 Selective Service
Did you register under any Selective Service Act?
If no, state reason (e.g., female and not required).
<ul> <li>If yes, please provide your selective service number, residence address at time of registration, and the</li> </ul>
city, county, and state where registered.
□ Yes □ No
RI-8 Criminal Acts/Academic Dishonesty
Have you ever been involved in, reprimanded for, or disciplined by an employer or educational institution for
misconduct including:
and of dish and the found on density
acts of dishonesty, fraud or deceit;
lying on a resume, or misrepresentation;
academic misconduct, including such acts as cheating;
misconduct involving student activities;
• theft;
excessive absences;
failure to complete assignments in a timely manner;
actions in disregard of the health, safety and welfare of others;
sexual harassment;
neglect of financial responsibilities; or     neglect of financial responsibilities; or
conduct related to the use of alcohol or any other drug in the last ten (10) years.
If yes, please provide the following information about each occurrence: Employer or educational institution
name and address, name of supervisor/advisor, the date of action, and an explanation of circumstances including
any defenses or mitigating factors and/or any explanations for the conduct or circumstances in question.
□ Yes □ No
RI-9 Academic/Employment Dismissal
Have you ever been terminated or granted a leave of absence by an employer or withdrawn from an educational
institution? (Do not include leaves of absence authorized by state or federal law, e.g., family and bereavement

leave, etc).

If yes, please set forth specifics, including date of action; by whom taken; and the name and address of

the employment supervisor or academic advisor involved.
□ Yes □ No
RI-10 Creditors
List all sources from which you borrowed or with which you have established credit, including any credit cards, during the last five (5) years, and the status, i.e. current or delinquent. [Information regarding student loans should be listed in subsection Question RI-12.] A reference to your credit report will not answer this question sufficiently. If none, please select "Not Applicable."
For each entry, please provide the following information: the name and full address (street name, city/town, state, zip code) for the creditor, account number associated with the entry, date repayment begins, current balance and status of the account.
RI-11 Debts > \$500
List all current debts over five hundred dollars (\$500.00), and indicate status, i.e. current or delinquent. A reference to your credit report will not answer this question sufficiently. If none, please select "Not Applicable."  For each entry, please provide the following information: the name and full address (street name, city/town, state, zip) for the creditor, account number associated with the entry, date repayment begins, current balance and status of the account.
and states of the decount.
RI-12 Student Loans
List all student loans and indicate status, i.e., current, deferred, or delinquent. A reference to your credit report will not answer this question sufficiently. <b>If none, please select "Not Applicable."</b>
For each entry, please provide the following information: the name and full address (street name, city/town, state, zip) for the creditor, account number associated with the entry, date repayment begins, current balance and status of the account.

Have any judgments ever been entered against you in favor of a creditor?  If yes, please list the names, present address and zip code of the holder of each. If not satisfied, please so state and indicate amount unsatisfied and payment plan.  Per No  RI-14 Stock Holdings  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.
If yes, please list the names, present address and zip code of the holder of each. If not satisfied, please so state and indicate amount unsatisfied and payment plan.    Yes
Pres No  RI-14 Stock Holdings  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.
RI-14 Stock Holdings  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.
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.
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.
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.
□ Yes □ No
RI-15 Business Ventures
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.
□ Yes □ No
RI-16 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: name of the entity, case number, date of filing, court/agency involved, type of proceeding, plaintiff name, defendant name, and disposition.

□ No

□ Yes

<u> </u>
RI-17 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?
as of the present date:
If yes, please provide the following information about each proceeding: name of the entity, case number,
date of filing, court/agency involved, type of proceeding, plaintiff name, defendant name, and disposition.
aute of filling, country agency involved, type of proceeding, plantery name, defendant name, and disposition.
□ Yes □ No
RI-18 All Civil Proceedings
List all suits in equity, actions at law, or other statutory proceedings, matters in probate, support, administrative
proceedings, quasi-judicial proceedings and every other judicial proceeding of every nature and kind, except
criminal proceedings, to which you are or have ever been a party. If none, please select "Not Applicable".
community proceedings, to which you are or have ever been a party in hone, proceed in the reprinciple.
If applicable, please provide the following information about each proceeding: case number, date of filing,
court/agency involved, type of proceeding, plaintiff/prosecutor name, defendant name, and disposition.
RI-19 Criminal Charges
List all instances in your life (including while you were a juvenile) in which you have been arrested, detained or
restrained, given a warning or taken into custody or accused, formally or informally, of violating a law or
ordinance, or accused, formally or informally, of committing a delinquent or wayward act. Also include any
instance in which you have been questioned regarding any criminal matter. Traffic violations should be listed in
NCBE Questions 32 and 33, as applicable. If none, please select "Not Applicable".
If applicable, please provide the following information about each occurrence: date of incident, case
number, name and complete address of arresting/detaining agency, original charge/accusation, disposition/fine,
and a complete and detailed explanation of facts and subsequent actions.
RI-20 Juvenile Criminal Incidents
List all criminal proceedings to which you were or have been a party and all proceedings in which you were or

have ever been a party and all proceedings in which you committed or were accused of committing a delinquent

RHODE ISLAND Revised 04/19/2022

or wayward act or violation of the law while you were a juvenile. If none, please select "Not Applicable."
If annihable places are side the following information about each accompany date of insident each
If applicable, please provide the following information about each occurrence: date of incident, case
number, name and complete address of arresting/detaining agency, original charge/accusation, disposition/fine,
and a complete and detailed explanation of facts and subsequent actions.
DI 24 Inconvenitor
RI-21 Immunity
Have you ever been offered or granted immunity, testified or been called as a witness in any grand jury proceeding, criminal action or criminal proceeding in which you were not a party? If the provisions of R.I.G.L. § 12-30-13 relating to the protection and supervision of criminal witnesses apply to you, please indicate.
12 30 13 relating to the protection and supervision of eliminal withesses apply to you, prease maleate.
If yes, please provide the following information about each occurrence: name of defendant, name and
address of court involved, nature of the action/proceeding, and a explanation of the circumstances.
dualess of court involved, nature of the decion, proceeding, and a explanation of the encumstances.
□ Yes □ No
RI-22.1 Rhode Island Surety Bond
Have you ever been bonded under a surety bond?
If yes, please state the date, facts, and the circumstances surrounding the bonding, including the nature
of the office or position for which you were bonded, dates, amount of bond, and name of surety
company.
□ Yes □ No
RI-22.2 Rhode Island Bond Denial
Have you ever been refused a bond?
If yes, please state the date, facts, and the circumstances surrounding the refusal.
in yes, piease state the date, lates, and the circumstances surrounding the relusar.
□ Yes □ No
RI-22.3 Rhode Island Bond Cancellation
If you have ever been bonded, has anyone ever sought to recover upon such bond or to cancel the same?

•

If yes, state the circumstances and the attempt at the actual recovery of the bonding or the conditions of the cancellation.
□ Yes □ No
RI-23 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.
□ Yes □ No
RI-24 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 each occurrence:
• If not admitted: 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.
<ul> <li>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).</li> </ul>
□ Yes □ No
RI-25 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-26 Attorney References

This question applies only to those applicants who have been previously admitted to practice law in any state or jurisdiction. If you have never been previously admitted to practice law in any other state or jurisdiction, select "Not Applicable."
List the name, firm/business name, complete addresses, and occupation/profession of three (3) attorneys and two (2) clients who know you, who are not relatives and are not listed elsewhere in this application.
RI-27 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:
<ul> <li>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.</li> <li>Upload a copy of the associated record.</li> </ul>
□ Yes □ No
RI-28 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.