

Character & Fitness Questionnaire

PREAMBLE

If you have questions about the Fitness Application, you should first consult the following:

- Policy Statement of the Fitness Board
- Making the Mark - Character and Fitness for Admission to the Bar
- Frequently Asked Questions

I understand that the above documents are available to answer questions about the Fitness Application.

PERSONAL INFORMATION

Personal Information

Please enter your personal information.

All processing will be done on the basis of your full name; therefore, all records will be maintained and certification(s) issued in your full name. If you do not have a middle name you must indicate by typing ' NMN '.

Full name John Smith

By what name are you usually called?

Date of birth January 10, 1961

Birth City

Birth State

Birth Country

Contact Information

CONTACT INFORMATION

You are responsible for updating your contact information whenever it changes, up until the time you receive a Certificate of Eligibility to Practice Law. You can update your contact information by clicking on "Edit Personal Info" above.

Email Address sample@email.com

Street or P.O. Box # 3855 Lake Clearwater Place

Apt. # or Address 2 Apt. 222

City California

State Florida

ZIP Code 90210

Preferred Contact Number (812)111-5100

Alternate Number (574)111-4303

Other First, Middle or Last Name

Have you ever been known by another name other than a nickname (e.g. maiden name)?

List each name used, or by which you have at any time been known, and the dates that name was used.

If your name was changed by court order, give the name and location of the court issuing the order and the date of the order. You will need to provide a copy of the court order.

Last Name (Maiden)

First Name

Middle Name

From Mo/Yr

To Mo/Yr

Reason name was used

Social Security Number

Have you ever been issued or used any social security number other than the one you provided when you registered an account with the Office of Bar Admissions, or have you ever been issued a similar number in another country?

Provide the social security number(s) you have used and explain the reason why you have had more than one number.

Social Security Number

Explanation

Law School

Please choose the name of the law school which conferred or will confer your degree.

Citizenship Information

1.1 Were you born in the United States?

You must provide:

- A copy of your birth certificate.

1.2 Were you born in a foreign country to US citizen parents?

You must provide a copy of the Consular Certificate of Birth Abroad.

1.3 Are you a naturalized United States citizen?

1.4 Do you reside lawfully in the United States as a Permanent Resident?

1.5 Do you currently hold the F-1 student Visa?

You must print, complete and submit the Nonimmigrant Affidavit along with your Fitness Application.

- 1.6** Have you recently filed an application with United States Citizenship and Immigration Services (USCIS) to adjust your status to that of a Permanent Resident of the United States

Provide a copy of the **Notice of Action** form issued by the USCIS and provide a copy of the citizenship page of your passport.

If you are not a citizen of the United States or if you are not a Permanent Resident of the United States, you must print, complete, and submit the Nonimmigrant Affidavit, along with your Fitness Application, and provide the required documentation to support the claims made in the Affidavit.

Provide a copy of the front and back of your Permanent Resident Card and provide a copy of the citizenship page of your passport.

Provide a copy of your Certificate of Naturalization or Certificate of Citizenship.

Selective Service

Male citizens and permanent residents who are under 26 years old must be registered with the Selective Service System.

You can verify your registration at: <https://www.sss.gov/verify>

I have registered with Selective Service

- 2.2** Selective Service Number

- 2.1** Please select one:

Please explain

Marital Status

- 3.1** Are you married?

- 3.2** Enter the full name of your spouse.

Date of Marriage

- 3.3** Have you ever been widowed, divorced, or had a marriage annulled or set aside?

If a marriage was terminated by court order, you must provide copies of the following documents relating to each divorce: the complaint, answer, order of dismissal, decree or judgment, and settlement agreement.

Please select

- 3.4** You must provide the name of your former spouse and state when, where, and how your marriage was terminated. If you are widowed, you must provide the name of your deceased spouse.

- 4.1** Have you ever been under court ordered obligation to pay alimony or child support payments?

- 4.2** State your compliance with such support payments and list the name and last known address of your former spouse(s) or the custodial parent of your child(ren) to whom support is or was to be paid. Please also provide a copy of the court order unless it is already provided by the requirements of the previous question.

Name of Former Spouse/Custodial Parent of Your Child(ren)

Name of Child (Children)

Address 1

Address 2

City

State

ZIP Code

Email Address

State your compliance with support payments

OTHER JURISDICTIONS

Other Jurisdictions

- 5.1** Have you ever submitted a character and fitness application for admission to the Bar of any United States jurisdiction (including Georgia)?

- 5.2** In what state(s) have you applied for admission and when?

You must provide a complete and legible copy of each such application other than Georgia. If not available, you must provide a letter from the jurisdiction stating that the application is not available.

Name of Jurisdiction

Date Applied

Informal Interview or Formal Hearing

- 5.3** Have you ever, other than as a routine practice, had your fitness to practice law questioned through an informal interview, a formal hearing or by any other means?

Explain for each instance (of questioning, interview, or hearing) including the reason(s) for the questioning, the nature of the questioning, and the outcome.

Bar Examination

- 6.1** Have you ever taken the bar examination in any United States jurisdiction (including Georgia)?

- 6.2** If yes, provide the following information.

Jurisdiction

Date of Examination

Pass, fail or awaiting result

Denied Admission to the Practice of Law

- 7.1** Have you ever been denied admission to the practice of law in any jurisdiction, other than for failure of the bar examination, or been denied permission to take the bar examination of any jurisdiction?

Explain the denial of admission, including the name of the denying jurisdiction, the date of the denial, the reason why you were denied and any other information you deem appropriate.

Admitted to the Practice of Law

- 8.1** Have you ever been admitted to the practice of law in any United States jurisdiction including Georgia?

- 8.2** Indicate in which jurisdiction(s) you have been admitted, the date of admission, and whether it was by Examination or by Motion, and include your State Bar Membership Number.

You must provide a letter of good standing and disciplinary letter for each state in which you are admitted. Not all states issue both documents; therefore, please check with the other states in which you are admitted to determine what will be required.

Name of jurisdiction

Admission Date

Type of application

State Bar Membership Number

Good standing

- 8.3** Are you in good standing in every state in which you are admitted?

- 8.4** Indicate which state and explain why you are not in good standing.

State

Explanation

Complaints

- 8.5** Have any complaints been filed against you as an attorney with the disciplinary authority of any state in which you have been admitted to practice?

For each instance in which such a complaint was filed, state the name of the agency, authority, board or committee to whom the complaint was addressed, the date of the complaint, the nature of the complaint, the disposition of the complaint and any other information you deem appropriate.

You must provide copies of all documents and correspondence in each matter.

Name of Agency

Date of the complaint

Action/File/Case Number

Nature of complaint

Disposition

Other information

Discipline

8.6 Have you been the subject of any form of lawyer discipline, whether private or public, whether oral or written, in any jurisdiction in which you have been admitted to the practice of law?

Refer to Part C, Section 2(f) of the Rules Governing Admission to the Practice of Law.

State, for each instance of discipline, the name of the jurisdiction imposing the discipline, the facts and circumstances leading to the discipline, the date of the discipline, the nature of the discipline, the nature of the offense for which the discipline was imposed and any other information you deem appropriate.

Name of jurisdiction

Date of the discipline

Action/File/Case Number

Nature of the discipline

Nature of the offense

Other information

Facts and Circumstances

RESIDENTIAL HISTORY

Permanent and Temporary Addresses

9.1 Beginning with your current residence, list every place you have resided for more than three months in the last five years. If you resided on a school campus, you only need to list the name and address of the school.

NOTE: Adding an address on this screen DOES NOT update your current mailing address. To update your current mailing address, login to your homepage and click on "Edit Personal Info".

Resided From

Resided Until

Address Line 1

Address Line 2

City

State or Province

ZIP Code

Country

EDUCATIONAL INFORMATION

College (Excluding Law School)

10.1 Provide the following information for each college and university attended (other than law school).

College Name

Address 1

Address 2

City

State or Province

ZIP Code

Country

Dean of Students' Email

Attended From

Attended To

Degree Conferred

Was this a study abroad program or was it a college outside of the United States?

Please enter any additional information about the program in the Notes field below, including, if necessary, the location of the program and the college through which (if any) the program was taken.

Notes

Additional Information

Law School

11.1 Provide the following information for each law school you are presently attending as well as each law school you previously attended.

University Name

School Name

Address 1

Address 2

City

State or Province

ZIP Code

Dean of Student's or Registrar's Email

Attended From

Attended To

Degree Conferred or Expected to be Conferred

Was this a study abroad program or was the college outside of the United States.

Please enter any additional information about the program in the Notes field below, including, if necessary, the location of the program and the college through which (if any) the program was taken.

Notes

Additional Information

Educational Disciplinary

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

List each occurrence and list the date and circumstance of the occurrence(s).

College/University

Date of Occurrence

Circumstance of Occurrence

12.2 Have you ever been formally charged with cheating, lying or otherwise taking unfair advantage of fellow students at any college, university or law school you attended or are presently attending?

Provide complete details of each instance, its disposition and the punishment imposed, if any.

College/University

Disposition

Punishment imposed

Details of instance

12.3 Regardless of whether the record has been expunged, cancelled or annulled, or whether no record was made, have you ever been subject to proceedings before a school honor court or council (or any similar body)?

Provide a narrative for each instance including the date, full details of such charges, disposition and the punishment imposed, if any, as well as copies of any documentation or correspondence between you and the institution.

College/University

Date of instance

Details of charges

Disposition

Punishment imposed

MILITARY SERVICE

Armed Forces

13.1 Are you now or have you ever been a member of the armed forces of the United States, including the National Guard, or any of the reserve components?

You must furnish Report of Separation, Form DD214, or its equivalent for each period of active duty.

Dates of periods of active duty:

Start Date

End Date

Branch of Service

Highest Rank Achieved

Date of Discharge

Type of Discharge

If you are currently active in a reserve unit, provide the mailing address of your reserve unit.

I am currently in an active reserve unit.

Address 1

Address 2

City

State

ZIP Code

Country

13.4 As a member of the armed forces, were court martial charges ever made or proceedings instituted against you?

State the date, the nature of the charges, the facts, the disposition of the matter and the location and designation of the military establishment where such proceedings took place.

Date

Nature of the charges

Facts

Disposition of the matter

Location of the military establishment

13.5 As a member of the armed forces, was non-judicial punishment imposed upon you?

For each imposition of non-judicial punishment, give the date, the nature of the offense, the facts surrounding its occurrence and the location and designation of the military unit or command imposing punishment.

Date of imposition

Nature of the offense

Facts

Location of the military unit

13.6 As a member of the armed forces, were you asked to resign or given the opportunity to resign in lieu of judicial or administrative proceedings being instituted or carried out against you?

Give the date of such resignation, the nature of the proceeding which was or would have been instituted against you and the designation of the military unit or command which instituted or would have instituted proceedings against you.

Date of resignation

Nature of the proceedings

Designation of the military unit

13.7 Have you ever received a medical discharge or an administrative discharge for medical reasons?

Explain the medical reasons for such discharge, the name and address of the medical facility certifying the need for such discharge, and the date of your discharge.

Medical reasons for discharge

Date of discharge

Name of the medical facility

Address 1

Address 2

City

State

ZIP Code

Country

EMPLOYMENT

Notification

EMPLOYMENT

On the next page, you will be asked to provide your employment history. You should include all employment, including both law-related and non-law-related positions. We will contact your present and past employers, so please take care to provide the most current contact information available.

Employment History

Provide a complete list of your employment, beginning with your current or most recent employment and going back 10 years or to your 18th birthday (whichever is less). You do not need to disclose isolated or "odd job" employment, such as babysitting, tutoring, or yard work, in which you were employed by an individual at their home for less than 10 hours per week.

In addition, you should list ALL law-related employment, even if that employment was more than 10 years ago. If a law-related position was with a firm that has changed or been dissolved, please provide the name and contact information of a supervisor who previously worked at that firm and can verify your employment.

14.1 Have you ever been employed or had an internship?

Employer Name

Is this Position Law Related?

Supervisor Name or Employment Verification Contact

Your Position

Please indicate whether this position was paid, volunteer, or for academic credit.

Are you currently employed at this job?

Reason for Leaving

Date Started

Date Ended

Email Address of Supervisor or Employment Verification Contact

An email address is strongly preferred and will allow us to process your application more efficiently. If this is a legal employer, it is highly likely that you can provide an email address. If you are unable to provide an email address at this time, you may type "unknown" to proceed with your application. You can amend your application after it is submitted with valid email addresses.

Address 1

Address 2

City

State

ZIP Code

Country

Additional Information

During all time periods since my 18th birthday (or within the last ten years) not covered in my answer above, I was unemployed or attending school.

Discharge

14.2 Have you ever been discharged from any employment?

For each instance, state the date and circumstances. If the employer was not an individual, state the name and title of the supervisor.

Date

Circumstances

Name of Employer

Address 1

Address 2

City

State

ZIP Code

Name of Supervisor

Email address of supervisor or employment verification contact

Discipline

14.3 Have you ever been disciplined by an employer, or requested, formally or informally, to resign from or terminate employment?

For each instance, state the date, circumstances, and provide the name and address for each employer. If the employer was not an individual, state the name and title of the person making such a request.

Date

Circumstances

Name of Employer

Address 1

Address 2

City

State

ZIP Code

Country

Name of Supervisor

Email address of supervisor or employment verification contact

CREDIT**Credit Information****15.1** Do you have, or have you during the last five years had, a credit account with any merchant, bank, mortgage company, any other financial institution, credit union, oil company or any other business or credit enterprise?

Provide information on all lines of credit, credit cards and credit accounts, whether used or not and whether now active or not. Include accounts with zero balances. Be sure to include mortgages, car leases, car loans, joint accounts, and accounts on which you are an authorized user. Include information on all accounts for the last 5 years.

DO NOT ENTER STUDENT LOANS IN THIS SECTION. STUDENT LOAN INFORMATION IS LISTED IN QUESTION 16.

DO NOT SEND A COPY OF YOUR CREDIT REPORT FROM ANY CREDIT REPORTING AGENCY IN LIEU OF COMPLETING THIS QUESTION!

For purposes of updating please note: You are required to amend all changes with regard to credit except changes in monthly credit balances.

15.2 Credit Accounts Information

Creditor

Account Type

Approximate Balance Currently Owed do not include "\$"

Collection Agency

- 15.3** Have you ever had any type of account or debt turned over to a collection agency or an account that has been charged off?

If your answer to this question is "Yes," you must read the Policy Statement of the Board to Determine Fitness of Bar Applicants Regarding Character and Fitness Reviews, which you can find here. You should pay special attention to **Section D. Neglect of Financial Responsibilities.**

[Click here to access the Policy Statement.](#)

I have read and understand this policy.

Give the name and address of the creditor, account number, current balance, and describe the steps you have taken to satisfy the debt. If the account is paid in full, you must provide demonstrable proof.

Name of Creditor

Address 1

Address 2

City

State

ZIP Code

Country

Account Number

Current Balance

Describe the steps you have taken to satisfy the debt.

Creditor Judgment

- 15.4** Has a judgment ever been entered against you in favor of a creditor or any other entity?

If your answer to this question is "Yes", you must read the Policy Statement of the Board to Determine Fitness of Bar applicants Regarding Character & Fitness Reviews which is published on the Georgia Bar Admissions website. You should pay special attention to paragraph **C. Neglect of financial responsibilities.**

[Click here to access this document.](#)

I have read and understand this policy.

Name of Holders

Address 1

Address 2

City

State

ZIP Code

Country

Additional Information

List the names and present mailing addresses of the holders and furnish copies of such judgments.

If satisfied, you should provide copies of the satisfaction of judgment.

If not satisfied, you should provide a statement concerning the current status of the judgment, including copies of any correspondence concerning payment of the judgment.

Liens or Garnishments

15.5 Have you ever had any liens or garnishments filed against you?

If your answer to this question is "Yes", you must read the Policy Statement of the Board to Determine Fitness of Bar applicants Regarding Character & Fitness Reviews which is published on the Georgia Bar Admissions website. You should pay special attention to paragraph **C. Neglect of financial responsibilities**.

[Click here to access this document.](#)

I have read and understand this policy.

Provide the names and addresses of the holders; the amounts of the liens or garnishments and, if satisfied, furnish certified copies of the satisfactions.

Name of Holder

Address 1

Address 2

City

State

ZIP Code

Country

Amount of Lien

Amount of Garnishment

Additional Information

Bankruptcy

15.6 Have you ever filed a petition in bankruptcy or for establishment of a wage earners plan?

If your answer to this question is "Yes", you must read the Policy Statement of the Board to Determine Fitness of Bar applicants Regarding Character & Fitness Reviews which is published on the Georgia Bar Admissions website. You should pay special attention to paragraph **C. Neglect of financial responsibilities.**

Click here to access this document.

I have read and understand this policy.

For each filing, list the court in which such petition was filed, the date of filing and the final disposition of the matter. You must include a copy of the petition, list of creditors, and the order of discharge.

Type of Bankruptcy

Name of Court

Date of Filing

Case Number

Final Disposition

Reason for Bankruptcy

Additional Information

STUDENT LOANS

Student Loan

For student loans that were satisfied over 10 years ago and do not appear on your credit report select "No".

16.1 Have you ever obtained a student loan?

16.2 Are your student loans in deferment?

16.3 Are your student loans in forbearance?

16.4 Total amount of student loans owed

16.5 Have you ever defaulted on a student loan?

*** It is recommended that you pull a current credit report to verify the status of any loans.**

You must provide complete mailing addresses including ZIP codes.

Loan Holder

Address 1

Address 2

City

State

ZIP Code

Country

Account Number

Original Loan Amount

Amount Currently Owed

Explanation of Default

Defaulted on a Student Loan

16.3 Have you ever defaulted on a student loan? You must answer even if the debt is now satisfied.

If your answer to this question is "Yes", you must read the Policy Statement of the Board to Determine Fitness of Bar applicants Regarding Character & Fitness Reviews which is published on the Georgia Bar Admissions website. You should pay special attention to paragraph **C. Neglect of financial responsibilities.**

[Click here to access this document.](#)

I have read and understand this policy.

Give the name and address of the creditor, the loan account number, the amount owed and, if still in default, what steps have been taken to bring the account up-to-date.

Provide current documentation from your lender or servicer showing the status of each defaulted student loan.

Guarantor/Lender

Address 1

Address 2

City

State

ZIP Code

Account Number

Default Amount

Amount Currently Owed

Date Defaulted

State the steps you have taken to bring the account up-to-date.

Student Loan Judgment

16.4 Has a judgment ever been entered against you in favor of a student loan guarantor or lender?

If your answer to this question is "Yes", you must read the Policy Statement of the Board to Determine Fitness of Bar applicants Regarding Character & Fitness Reviews which is published on the Georgia Bar Admissions website. You should pay special attention to paragraph **C. Neglect of financial responsibilities**.

Click here to access this document.

I have read and understand this policy.

Provide the names and present addresses of the holders.

You must furnish certified copies of such judgments and, if satisfied, satisfactions of judgments.

Name of Holder

Address 1

Address 2

City

State

ZIP Code

Country

Additional Information

BUSINESS OWNERSHIP

Business Ownership

- 17.1** Are there any businesses, corporations, organizations, partnerships, professional associations, or individual partnerships in which you own or have owned a 50% or greater interest?

Litigation

- 17.3** Have you ever been involved in any litigation or arbitration related to the business or businesses referred to in the previous section?

Describe all litigation, including arbitration and governmental hearings in which business listed in the previous question has been involved.

Explanation

- 17.4** Have there been had any decrees, judgments, or liens against the business or businesses referred to in the previous section?

List any decrees, judgments, liens or orders and amounts against business entered against the business or businesses referred to in the previous section.

Explanation

CIVIL LITIGATION**Litigation**

18.1 Have there been any instances of litigation (equity, actions at law, statutory proceedings, lunacy, guardianship, or any other civil or administrative proceeding, other than bankruptcy) in which you have been a party or that you initiated or that was initiated on your behalf?

This question does not pertain to a class action law suit in which you were or are a plaintiff.

Complete the following for each instance of litigation. You may be asked to provide copies of the complaint, answer, order of dismissal or judgment, and settlement agreement (if any) filed in connection with each instance of litigation.

18.2 Civil Litigation Information

Date

Court / Agency

Case Name and Number

Name of Plaintiff

Name of Defendant

Nature of Proceedings

Disposition

DRIVER'S INFORMATION**Driver's License**

Do you hold a driver's license?

For each jurisdiction, including Georgia, in which you have held a driver's license during the last 12 months, you must submit a **CERTIFIED** copy of your official driving record. The record should include the maximum number of years the state provides (seven years for Georgia) and be dated within thirty days of the submission date.

Driver's License Number

State

Date Issued

Expiration Date

Traffic Violations

19.1 Excluding parking violations, have you been cited or charged with more than five traffic violations within the past five years (including violations to which you were allowed to enter a "nolo contendere" plea)?

19.2 Please provide information on each of those violations to the best of your ability.

Please do not include charges of Driving under the Influence of Drugs or Alcohol (DUI, DWI, etc.) in your answer to this question. You will be required to list all DUI charges in response to question #20.

Date

Nature of Violation

Name of Court

Address 1

Address 2

City

State

ZIP Code

Disposition or Status

Other Licenses

List each state or jurisdiction and the approximate date the license or permit was initially issued.

For each jurisdiction, including Georgia, in which you have held a driver's license during the last 12 months, you must submit an Official Driving Record.

If you obtain a driver's license from another state or jurisdiction (including Georgia) after filing this application, you must submit a **CERTIFIED** copy of your official driving record from that agency as well.

19.3 Excluding your current driver's license, have you applied for or been issued a driver's license or an operator's permit by any other state or jurisdiction?

For each jurisdiction, including Georgia, in which you have held a driver's license during the last 12 months, you must submit a **CERTIFIED** copy of your official driving record. The record should include the maximum number of years the state provides (seven years for Georgia) and be dated within thirty days of the submission date.

Date Issued

Date License Surrendered or Expired

State

Suspended License

19.4 Has your driver's license ever been suspended or revoked?

Name of Agency

Address 1

Address 2

City

State

ZIP Code

Country

Date of Suspension or Revocation

Length of Suspension

Reason for Suspension or Revocation

Current status of license or other facts which may be pertinent

DUI

20 Driving Under the Influence

20.1 Have you ever been charged with or cited for driving under the influence of alcohol or drugs?

Date you were charged or cited

Agency (Police Department)

Address 1

Address 2

City

State

ZIP Code

Disposition

Date of Disposition

Are you currently serving a probated sentence?

You are required to provide a detailed narrative of the facts and circumstances surrounding each offense as well as **copies of the arresting officer's report** (including any citations) and all court documents for each charge.

Facts and circumstances surrounding each offense

Have you completed all the requirements of the court?

If you have not, explain what you have not completed and why.

Explain what you have not completed and why.

CRIMINAL PROCEEDINGS

Criminal Proceedings

Before you complete this section, you must read the Policy Statement of The Board To Determine Fitness of Bar Applicants Regarding Character And Fitness Reviews, **Part A - Unlawful Conduct**, which is published on the Georgia Bar Admissions Website.

Click Here to access this document.

I have read and understand this policy.

21.1 Have you ever been detained, arrested, formally accused, cited or prosecuted for the violation of any law?

Excluding traffic offenses, you must disclose each instance even though the charges may have been dismissed or you were acquitted or allowed to plead nolo contendere or adjudication was withheld or a conviction was reversed, set aside, or vacated or the record sealed or expunged and regardless of whether you have been told by anyone, including a judge or a lawyer, that you need not disclose any such instance.

You must to provide copies of all court documents relating to each instance in which you were detained, arrested, formally accused, cited or prosecuted for the violation of any law.

If a fine was paid and court was not attended, you must provide the name and address of the entity to which the fine was paid.

Date of Charge

Nature of Offense

City

State

Name of Court

Court Address

City

State

ZIP Code

Disposition

Date of Disposition

Did this offense result in a sentence of confinement in a state prison or penitentiary for a period of one year or more, even if such sentence or imprisonment was suspended?

Did this offense result in the conviction of a felony?

Have you applied for or received a full pardon (or in the alternative have you received restoration of your civil rights) for that crime?

Provide a detailed narrative of the facts and circumstances surrounding each charge.

You must provide copies of all court documents.

21.6 Are you currently serving a probated sentence as a result of any criminal charge?

Indicate which charge and the date your probation is scheduled to be completed.

Charge

Date of completion

Unauthorized practice of Law

22.1 Have you ever been charged with or been under investigation for the unauthorized practice of law?

Provide a written explanation of each charge.

You must provide copies of all correspondence between you and the investigative body as well as copies of that body's reports in each charge or investigation for the unauthorized practice of law.

Explanation

Immunity

23.1 Have you ever been offered immunity from prosecution in any criminal action or criminal proceeding?

State the place, date, the name of the defendant, the nature of the act or the proceeding, the court and the circumstances.

Place

Date

Name of Defendant

Nature of act or proceeding

Name of Court

Circumstances

GENERAL QUESTIONS

PREAMBLE

The purpose of the following questions is to determine the current fitness of an applicant to practice law. All information provided in this application is kept strictly confidential. The vast majority of applicants are certified as fit to practice law; the Board on very rare occasion denies certification to applicants whose current ability to function is significantly impaired in a manner relevant to the practice of law or to applicants who demonstrate a lack of candor by their responses. This is consistent with the public purpose that underlies the Board's responsibilities. Conversely, the Board does not deny certification to applicants based on their decision to seek treatment or support for a mental health condition. In fact, the Board encourages applicants to seek treatment if needed and believes that an applicant's decision to obtain necessary treatment is indicative of a person who possesses the character and fitness requisite to be a member of the Bar of Georgia.

I have read and understand this preamble.

Conditions

24

Within the past two years, have you had any condition or impairment (including, but not limited to, substance use, alcohol use, or a mental, emotional, or nervous disorder or condition) that would substantially inhibit your ability to practice law in a competent, ethical, and professional manner? If you have been or are being treated for a condition so that it does not currently affect your ability to practice law in a competent, ethical, and professional manner, then you need not disclose it.

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?

Note: Please be aware that you may be asked to contact your treating physician, counselor and/or hospital and request that your records and/or a summary of your treatment be sent to the Office Bar Admissions. The Board to Determine Fitness of Bar Applicants is aware of HIPAA requirements.

Describe the condition or impairment

Summary of the course of the condition or impairment, including the conduct, symptoms and circumstances that precipitated treatment.

Note: Please enter each facility and/or provider as a separate entry. Use "Add More" button at bottom of page to add additional providers.

Name of attending Physician or Counselor

Name of Hospital or Institution

Address 1

Address 2

City

State

Zip Code

Description of any treatment and/or monitoring program, dates of treatment, and results of treatment.

Functioning

25

Has your functioning at school or at work ever been sufficiently impaired (as the result of substance abuse, alcohol abuse, or a mental, emotional, or nervous or behavior disorder or condition) as to require inpatient treatment?

Note: Please be aware that you may be asked to contact your treating physician, counselor and/or hospital and request that your records and/or a summary of your treatment be sent to the Office Bar Admissions. The Board to Determine Fitness of Bar Applicants is aware of HIPAA requirements.

Describe the condition or impairment

Summary of the course of the condition or impairment, including the conduct, symptoms and circumstances that precipitated treatment.

Note: Please enter each facility and/or provider as a separate entry. Use "Add More" button at bottom of page to add additional providers.

Name of attending Physician or Counselor

Name of Hospital or Institution

Address 1

Address 2

City

State

Zip Code

Description of any treatment and/or monitoring program, dates of treatment, and results of treatment.

Condition Used as Defense

26

Within the past five years, have you asserted any condition or impairment as a defense, in mitigation, or as an explanation for your conduct in the course of any inquiry, any investigation, or any administrative or judicial proceeding by an educational institution, government agency, professional organization, or licensing authority, or in connection with an employment disciplinary or termination procedure?

Note: You must upload or mail in copies of all pertinent records with regard to your answer to Question 26.

Provide an explanation, including all relevant dates

Name of entity before which the issue was raised (i.e., court, agency, etc.)

Address 1

Address 2

City

State

ZIP Code

Disposition, if any

Date of Disposition

Other Licenses

27

Excluding a license to practice law, have you ever applied for a state or local license in order to pursue a career, such as a real estate license, a professional license, etc.?

License Type

Licensing Agency

Agency Address

City

State

ZIP Code

Application Date

Were you required to show proof of good character?

Was an Exam Required

Was the license issued?

Date License was Issued

License Number

Is the license currently valid?

Provide a full explanation as to why the license is no longer valid.

Please explain the reason for non-issuance

Disciplinary Proceedings**28** Have any disciplinary proceedings been instituted against you on behalf of any licencing agency?

Name of person or agency instituting proceedings

Address 1

Address 2

City

State

ZIP Code

Disposition

REFERENCES**Personal References**

Provide the names and email addresses of **five** personal references who have known you well within the past five years.

Do not list:

- a) your spouse, a relative (including in-law), current roommate, or any current fellow student at your law school;
- b) your present or former employer or supervisor;
- c) more than one professor at your law school; or
- d) more than one member of the same household.

Prefix

First Name

Last Name

Email Address