



HOUSE COUNSEL APPLICATION

for

Admission to the Idaho State Bar

Please return the original completed application; only original legible applications will be accepted. Copies or scanned applications will not be accepted and will be returned. Please do not bind or staple any part of this application.

Please check the Idaho State Bar website to make sure you are submitting the current application, as this application is subject to updates.

1. Name: _____
First Name Middle Name Last Name Suffix
(Print your full name)

Name: _____
First Name Middle Name Last Name Suffix
(Print your name exactly how you want it to appear on the Order from the Idaho Supreme Court.)

Social Security Number: _____
(Furnishing your social security number is voluntary pursuant to the Federal Privacy Act of 1974. Your SSN will be used for purposes of investigation and verification and will help avoid errors of identity.)

Mailing Address for all official correspondence:
(The ISB Admissions Department must be informed of any address changes.)

(Street or Box Number)

(City, State & Zip) (_____) _____
(Daytime Telephone Number)

(Email Address) (_____) _____
(Daytime Fax Number)

2. Date Submitting Application: _____

Fee: \$800.00 [Idaho Bar Commission Rule 203(c)(1)(D)]
Please make checks payable to IDAHO STATE BAR
Additional investigation fees may be assessed pursuant to Idaho Bar Commission Rule 203(c)(2)(B)

3. Date of Birth: _____ Birthplace: _____ Male /Female

Attach additional pages if necessary to respond fully to the following questions.

4. Yes No
 Have you ever been known by any other name or surname? If so, explain fully, including exact dates. If your name or surname has been changed by court order, attach a copy of the order.

PART ONE: RESIDENCES

5. Beginning with your current address and continuing in REVERSE CHRONOLOGICAL ORDER, list every permanent and temporary residence during the last ten years. There should be no gaps between dates.

From: (Month and Year):
To/Through (Month and Year):
Street:
City:
State:
Zip Code:

From: (Month and Year):
To/Through (Month and Year):
Street:
City:
State:
Zip Code:

From: (Month and Year):
To/Through (Month and Year):
Street:
City:
State:
Zip Code:

From: (Month and Year):
To/Through (Month and Year):
Street:
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Street:
City:
State:
Zip Code:

From: (Month and Year):
To/Through (Month and Year):
Street:
City:
State:
Zip Code:

From: (Month and Year):
To/Through (Month and Year):
Street:
City:
State:
Zip Code:

PART TWO: EDUCATION

6. List *all* colleges/universities you have attended and the degree granted (*excluding JD*).

College/University	Location	Dates of Attendance	Degree	Date Granted

7. List *all* law schools you have attended, including postgraduate law studies. List the law school where you received your juris doctorate degree first and place a check in the box if that law school was fully or provisionally approved by the American Bar Association at the time of your graduation. See Idaho Bar Commission Rules 202(a)(3), 200(e).

College/University/ABA Approved	Location	Dates of Attendance	Degree	Date Granted
<input type="checkbox"/> ABA approved or provisionally approved			JD	

8. Transcripts: (All Transcripts Must Be Sent Directly To The Idaho State Bar)

- a) You must request that a *certified copy* of your transcript of credits from all the colleges/universities you attended be sent directly to the Idaho State Bar.
- b) You must request that a *certified copy* of your transcript of credits from *all* law school studies be sent directly to the Idaho State Bar. ***Please note that the Idaho State Bar is not ordering your law school transcripts with the Consent to Release Records Forms that you submit with this application. You must order them directly from each law school.***

PART THREE: EMPLOYMENT

9. List your present employment in the following format. For periods of unemployment, list “unemployed” with appropriate dates. If you are employed by an Idaho law firm or law department, please describe your responsibilities in answer to question 17.

Employer/Self Employed:

Street:

City:

State:

Zip Code:

Supervisor Name and Title:

Phone Number:

Date of Employment - (Month and Year):

Position:

Unemployed:

Dates of Unemployment:

-
10. Excluding the practice of law, list all of your employers for the past ten years beginning with the most recent employer. For periods of unemployment, list “unemployed” with appropriate dates. This information must be complete and account for the entire ten year-period. There should be no gaps between dates. *Submit a typewritten addendum if necessary.*

From (Month and Year):

To/Through (Month and Year):

Employer:

Street:

City:

State:

Zip Code:

Occupation:

Reason for Leaving:

If not employed during this time period, please complete the next two lines:

Unemployed:

Dates of Unemployment:

From (Month and Year):

To/Through (Month and Year):

Employer:

Street:

City:

State:

Zip Code:

Occupation:

Reason for Leaving:

If not employed during this time period, please complete the next two lines:

Unemployed:

Dates of Unemployment:

PART FOUR: MILITARY SERVICE

- 11. Yes No** Are you presently serving or have you ever served in the Armed Forces of the United States (including the National Guard)?
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If yes, attach a detailed statement including:

- a) Branch of service;
- b) Identification number;
- c) Rank;
- d) Inclusive dates of your service;
- e) Whether or not you received less than an honorable discharge; *(If yes, give complete details)*,
- f) Whether or not you were ever court martialed or subject to any court martial proceedings. *(If yes, give complete details)*.

If discharged, attach a copy of your separation or discharge papers.

PART FIVE: PREVIOUS APPLICATIONS, EXAMINATIONS OR ADMISSIONS

- 12. Yes No** Have you ever previously applied for admission in Idaho?
- If yes, complete the following:

Date of Application	Disposition (Withdrew, Rejected, Failed)

- 13.** List the jurisdictions where you have applied for admission.

Jurisdiction	Date of Application	Date of Exam (if admitted by exam)	Disposition (Withdrew, Rejected, Failed, Passed)

Please note: If you apply for admission in another jurisdiction subsequent to filing this application, you must update your application giving each jurisdiction, date of application and disposition.

PART SIX: LAW PRACTICE

14. CERTIFICATE OF GOOD STANDING

List the jurisdiction(s) where you have been admitted to the practice of law and indicate whether you were admitted by examination or motion (reciprocity).

Jurisdiction	Date of Admission	YES/No Admitted by Examination	YES/No Admitted by Motion (Reciprocity)	Current Status

Please note: If you are admitted to practice law or are denied admission subsequent to the filing this application, you must submit an addendum to your application giving the name of the jurisdiction and the date of admission or denial.

You must request that a current **Certificate of Good Standing** from the licensing authority of each jurisdiction (state or territory) where you have been admitted containing the following information be sent **directly** to the Idaho State Bar:

- a) The date you were admitted to practice law in that jurisdiction.
- b) That you are a member in good standing of the bar and are entitled to practice law in that jurisdiction;
- c) That there is not now pending nor has there ever been pending any complaint, grievance, disciplinary proceeding, or disciplinary action against you except as is specifically stated in this certificate; and
- d) As to each such complaint, grievance, disciplinary proceeding or action: the nature of the charge and the full facts, including documents verifying the disposition of the matter and the name and address of the person in possession of the permanent records.
- e) If you are inactive, please submit a statement from the jurisdiction to that effect along with a discipline check for the years you were active.

Certificates received that do not contain the above information will not meet the requirements of this question. Certificates must be dated no more than thirty days prior to the date you submit your application. Please note that some jurisdictions describe an attorney’s discipline history in a separate document. If that is the case, submit both a Certificate of Good Standing and a discipline history report from the jurisdiction.

15. For every jurisdiction that you have been admitted, please attach a statement listing the following information:

- a) Name of all courts before which you have been or are entitled to practice;
- b) Name of all administrative agencies before which you have been or are entitled to practice;
- c) Name of all state and local bar associations of which you have ever been or are a member.
- d) In each instance, specify the highest tribunal of that body and state, whether you are now a member or entitled to practice before that body, and if not, the date and reason for disqualification or termination of membership or right to practice.

16. List the city(ies) and jurisdiction(s) where you have practiced law.

Jurisdiction	City	Dates

17. Attach a statement **in the following format** and providing the following information for each state or jurisdiction in which you currently practice or have practiced since first being admitted to the practice of law:

- a) The name and exact address of each office or place at which you are or have been engaged in the practice of law and the full names of all employers, supervisors, partners and/or associates, specifying their relationship to you;
- b) Each period during which you were engaged as an attorney at each employment with exact dates;
- c) A complete statement describing your practice of law (*include nature and extent of your duties and/or practice*) with each employment (including any temporary or part-time work);
- d) The reason for termination or discontinuance of each employment period.
- e) If you are currently employed by an Idaho law firm or law department, describe your responsibilities in detail.

PROOF OF EMPLOYMENT

Pursuant to Idaho State Bar Rule 225(b)(6) a house counsel applicant must submit proof of employment with the qualifying company, association or other business entity; or confirmation of an offer of future employment with the qualifying company, association or other business entity, provided that the house counsel license shall not be effective until such employment commences.

PART SEVEN: LAW PRACTICE REFERENCES

18.

- a. Give the names of three (3) attorneys or judges and two (2) clients in **each** jurisdiction where you have practiced and with whom you are personally acquainted. These people must not be related to you by blood or marriage. If you have not had any clients, please indicate NA in the appropriate boxes and include an explanation. If you are unable to provide references for a jurisdiction, please submit an explanation as to why you are unable to do so.
- b. You must send the *Reference Forms* to these individuals. Please list your name on the top of each reference form and request that references mail all forms **directly** to the Idaho State Bar. (*See Information Sheet.*)
- c. Do not include those references named in Question #38 of this application.
- d. Use a separate page for each jurisdiction.
- e. Please copy this page for additional jurisdictions.

Jurisdiction: _____

Name	City	Occupation
1. (Attorney/Judge)		
2. (Attorney/Judge)		
3. (Attorney/Judge)		
4.(Client)		
5.(Client)		

PART EIGHT: CHARACTER AND FITNESS

If you fail to provide full and complete details to the following questions, your application may be delayed or denied. Similarly, delay in providing the required supporting documentation may result in denial of your application.

19. Yes No

Have you ever been arrested, served a summons, cited, questioned, indicted, taken into custody, charged, tried, or investigated for a felony, misdemeanor, infraction (including traffic tickets), or probation violation?

Include all incidents as a juvenile or adult, no matter how minor the charge, guilty or not, exonerated or not, whether or not sentencing was withheld, excluding only non-moving traffic violations which resulted in a penalty not exceeding \$25.00. Criminal and/or juvenile matters that have been expunged must be included.

If yes, for each such incident (including traffic tickets), regardless of the disposition, you must attach a supplemental sheet specifying in detail the following information:

- a) A detailed description of the charge;
- b) The date the charge was made;
- c) The name, address and telephone number of each person or entity bringing the charge;
- d) The name, address and telephone number of each attorney you retained to assist you in defending the charge;
- e) The reason why the charges were brought against you; and
- f) The final disposition of the charge, including probationary conditions. Any asserted probation violations must be detailed.
- g) Include copies of the dispositive order of the tribunal sufficient to describe the substantive resolution of the proceeding. If the matter is pending, submit a copy of the original complaint and documentation sufficient to describe the proceeding. For traffic tickets and infractions, if no record of the ticket itself exists, you may submit a driving record report from the state(s) in which any ticket or infractions was issued.

20.

Have you ever, in any capacity, been a party to, named or described in any civil proceeding, action, or suit, including divorce, court case, bankruptcy, or administrative proceeding?

If yes, attach a supplemental sheet specifying in detail:

- a) The nature of the proceedings (*state the underlying facts in detail and list all parties involved*);
- b) The tribunal, court, or administrative agency conducting the proceedings;
- c) The date of the proceedings;
- d) The case number, if any; and
- e) The disposition of the proceedings. For bankruptcy cases, submit the Statement of Affairs, the court Docket Sheet, all schedules and final orders, a list of debts not discharged in bankruptcy, and a description of the current status of any plan of reorganization. You must submit a current credit report and a complete accounting of all current financial obligations, including the principal balances of such obligations.
- f) Include copies of the dispositive order of the tribunal sufficient to describe the substantive resolution of the proceeding. If the matter is pending, submit a copy of the original complaint and documentation sufficient to describe the proceeding.

- 21.** **Yes** **No**
 Have you ever been subject to any proceedings which either sought or resulted in your admonition, reprimand, censure, suspension, discipline, citation for contempt, or fine as a member of any profession or occupation, or as holder of any license? This includes complaints made against you as an attorney in other states.

If yes, attach a supplemental sheet specifying in detail:

- a) The nature of the proceedings;
- b) The tribunal, court, regulatory body, or administrative agency conducting the proceedings;
- c) The date of the proceedings,
- d) The case number, if any; and
- e) The disposition of the proceedings.
- f) Include copies of the dispositive order of the tribunal sufficient to describe the substantive resolution of the proceeding. If the matter is pending, submit a copy of the original complaint and documentation sufficient to describe the proceeding.

- 22.** Have you ever been terminated from employment or requested to resign by an employer?

If yes, attach a supplemental sheet specifying in detail as to each incident:

- a) The name, address, and telephone number of the employer;
- b) The name of the person causing your dismissal or your resignation;
- c) The date of your dismissal or resignation; and
- d) the reason for such dismissal or request for resignation.
- e) If applicable, include copies of the dispositive order of the tribunal sufficient to describe the substantive resolution of the proceeding.

- 23.** Have you ever been charged, formally or informally, with misrepresentation, fraud, misapplication, perjury/false swearing, or misappropriation of property, either individually or in a representative capacity (i.e., as an officer of a business entity, partner or other fiduciary relationship)?

If yes, attach a supplemental sheet specifying all details, including the person or entity making the charge, the circumstances surrounding the charge, and the disposition of the charge.

- 24.** Have you ever been investigated, suspended, expelled, or disciplined, formally or informally, by any school, college, or university above the high school level? This includes any academic probation.

If yes, attach a supplemental sheet specifying all details, including the custodian of the records of such incidents.

- 25.** Have you ever held a bonded position?
 Has anyone ever sought to recover on or cancel such a bond?
If yes, attach a supplemental sheet specifying all details, including the name and address of the bonding company.

- | | Yes | No | |
|-----|--------------------------|--------------------------|--|
| 26. | <input type="checkbox"/> | <input type="checkbox"/> | <p>Have you ever been declared a ward of any court or adjudicated an incompetent person (including designation as a conservatee or protected person)?</p> <p>If yes, attach a supplemental sheet specifying all details, including the nature of the proceedings and the court in which they were held.</p> |
| 27. | <input type="checkbox"/> | <input type="checkbox"/> | <p>Have you ever applied for a license or certificate requiring proof of good moral character? This includes any applications for admission to the practice of law.</p> <p><input type="checkbox"/> <input type="checkbox"/> Have you ever been denied any license or certificate requiring proof of good moral character?</p> <p>If yes, attach a supplemental sheet specifying all details, including the nature of the license or certificate and the issuing authority's name, address, and telephone number.</p> |
| 28. | <input type="checkbox"/> | <input type="checkbox"/> | <p>Have you ever been denied admission or readmission to any school, college, law school or professional organization?</p> <p>If yes, attach a supplemental sheet specifying all details, including the reason(s) for the denial and the name, address, and telephone number of the organization.</p> |
| 29. | <input type="checkbox"/> | <input type="checkbox"/> | <p>Have you at any time in the past ten (10) years, either individually or in association with others, been in default on or past due for more than sixty (60) days on any indebtedness, including those barred by a Statute of Limitation?</p> <p>If yes, attach a supplemental sheet specifying all details, including the nature of the indebtedness, the nature of default or delinquency, the name, address and telephone number of the creditor, and the reasons for the default or delinquency. Include information regarding the status of all past due accounts and whether or not they have been satisfied. If you answered yes to this question, submit a current credit report with your application and a complete accounting of all current financial obligations, including the principal balances of such obligations. [See "Application Information Sheet" for details.] Submission of a credit report does not substitute for a complete accounting of financial obligations as required by this question.</p> |
| 30. | <input type="checkbox"/> | <input type="checkbox"/> | <p>Are you, either individually or in association with others, in default in any way in the performance or discharge of any duty or obligation imposed on you by decree of any court, including, but not limited to alimony, maintenance or child support?</p> <p>If yes, attach a supplemental sheet specifying all details, including the nature of the default, the name, address and telephone number of the court and the reasons for the default.</p> |
| 31. | <input type="checkbox"/> | <input type="checkbox"/> | <p>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 administrative or judicial proceeding or investigation; any inquiry or other proceeding; or any proposed termination by an educational institution, employer, government agency, professional organization or licensing authority?</p> <p>If yes, attach a supplemental sheet specifying all details, including pertinent names, addresses, dates and references to records, as appropriate.</p> |

- | | Yes | No | |
|-----|--------------------------|--------------------------|---|
| 32. | <input type="checkbox"/> | <input type="checkbox"/> | (a) 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? |
| | <input type="checkbox"/> | <input type="checkbox"/> | (b) Do you currently have any condition or impairment (including, but not limited to, substance abuse, alcohol abuse, or a mental, emotional or nervous disorder or condition) that in any way affects your ability to practice law in a competent and professional manner? |
| | <input type="checkbox"/> | <input type="checkbox"/> | (c) If your answer to question 32(b) is affirmative, are the limitations caused by your condition or impairment reduced or ameliorated because you receive ongoing treatment (with or without medication) or because you participate in a monitoring program? |

If yes, attach a supplemental sheet specifying the details of such treatment, including the name and contact information of each treatment provider. As used in question 32(b), *currently* means recently enough that the condition or impairment could reasonably affect your ability to function as a lawyer.

- | | | | |
|-----|--------------------------|--------------------------|--|
| 33. | <input type="checkbox"/> | <input type="checkbox"/> | Has your conduct ever been called into question with reference to the unauthorized practice of law in Idaho or any other jurisdiction? |
|-----|--------------------------|--------------------------|--|

If yes, attach a supplemental sheet specifying all details, including the nature of the charges, the accuser, the name, address and telephone number of the investigative body and the disposition of the charges.

- | | | | |
|-----|--------------------------|--------------------------|---|
| 34. | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever engaged in conduct which might be regarded as evidencing an inclination to be dishonest, to take unfair advantage of others or to be disloyal to those to whom a loyalty is legally owed? |
|-----|--------------------------|--------------------------|---|

If yes, attach a supplemental sheet specifying all details.

- | | | | |
|-----|--------------------------|--------------------------|---|
| 35. | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever supported or advocated the overthrow of the U.S. government by force? |
|-----|--------------------------|--------------------------|---|

If yes, attach a supplemental sheet specifying all details.

- | | | | |
|-----|--------------------------|--------------------------|--|
| 36. | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had a record sealed which contained facts relating to you? |
|-----|--------------------------|--------------------------|--|

If yes, attach a supplemental sheet specifying in detail the precise description of the record that was sealed, the name and address of the person or entity having custody of those records and the reasons a request was made for sealing those records.

- | | | | |
|-----|--------------------------|--------------------------|---|
| 37. | <input type="checkbox"/> | <input type="checkbox"/> | Are there any facts not disclosed by your answers concerning your background, history, experience or activities which may cause one to question your character, fitness or ability to practice law? |
|-----|--------------------------|--------------------------|---|

If yes, attach a supplemental sheet specifying in detail all relevant facts.

PART NINE: GENERAL REFERENCES

- | | | | |
|-----|---|--|--|
| 38. | a. Give the names of five (5) people who are able and specifically authorized by you to provide a factual, accurate and reliable appraisal of your moral character and general fitness to practice law. | | |
|-----|---|--|--|

- b. These people must not be related to you by blood or marriage and **three of the five references must have known you for at least five years.**
- c. Include three non-attorneys.
- d. Include two attorneys actively engaged in the practice of law.
- e. You must send the *Reference Forms* to these individuals. Please list your name on the top of each reference form and request that references mail all forms **directly** to the Idaho State Bar. (*See Information Sheet.*)
- f. It is your responsibility to follow up with all references to see that each form has been submitted.
- f. These five (5) references under this section are in addition to any references you provided in response to Question 18.

Name	Occupation	Nature and Length of Acquaintance
1. (Non-Attorney)		
2. (Non-Attorney)		
3. (Non-Attorney)		
4. (Attorney)		
5. (Attorney)		

PART TEN: ATTORNEY’S OATH

39. **Yes** **No**

Will you subscribe to the following oath?

“I Do Solemnly Swear That: (I do Solemnly Affirm That:)

I will support the Constitution of the United States and the Constitution of the state of Idaho.

I will abide by the rules of professional conduct adopted by the Idaho Supreme Court.

I will respect courts and judicial officers in keeping with my role as an officer of the court.

I will represent my clients with vigor and zeal and will preserve inviolate their confidences and secrets.

I will never seek to mislead a court or opposing party by false statement of fact or law and will scrupulously honor promises and commitments made.

I will attempt to resolve matters expeditiously and without unnecessary expense.

I will contribute time and resources to public service, and will never reject, for any consideration personal to myself, the cause of the defenseless or oppressed.

I will conduct myself personally and professionally in conformity with the high standards of my profession.

SO HELP ME GOD. (I hereby affirm.)”

40. On the lines provided below, write in your handwriting the last sentence of the Attorney’s Oath, beginning with, “I will conduct myself...”

PART ELEVEN: VERIFIED STATEMENT

State of _____)

County of _____)

I, _____ being first duly sworn, depose and say that:

I am the applicant named in and who has signed this application for admission to practice of law as a House Counsel attorney in the state of Idaho and fully understand that no refund will be made, in whole or part, of any application or investigation fee.

I fully realize that the determination as to whether I am admitted to practice law in Idaho may depend largely on the truth, falsity, or completeness of my answers set forth in this application and the statements attached.

I will give any further information, including fingerprints and photographs, if requested.

To my knowledge, the answers that I have given to the questions are true and complete.

I hereby authorize the Supreme Court of the state of Idaho and the Idaho State Bar, or any agent or authorized representative thereof, to make a complete investigation of my character and fitness to practice law in Idaho and of the completeness and truthfulness of my answers.

I hereby release and exonerate those authorized to conduct that investigation.

I hereby release and exonerate any person or organization supplying information to the Idaho State Bar, or any agent or authorized representative thereof, from liability of any kind resulting from the investigation or for furnishing information.

I understand that I will not receive and am not entitled to receive any information developed or secured during such investigation.

I have read the Idaho Bar Commission Rules as adopted by the Idaho Supreme Court relating to admission to practice law in Idaho.

Date

Applicant's Signature

Subscribed and sworn before me this _____ day of _____, 20_____.

SEAL

Notary Public for _____
Residing at _____
My Commission Expires: _____