

# Board of Law Examiners

Appointed by the Supreme Court of Texas  
Mailing Address: P. O. Box 13486, Austin TX 78711-3486  
Physical Address: 205 West 14th Street, 5th Floor, Austin TX 78701

OFFICE USE ONLY

## APPLICATION FOR FOREIGN LEGAL CONSULTANT CERTIFICATION

NAME: [ ] Mr. [ ] Ms. \_\_\_\_\_  
Last First Middle Maiden

\_\_\_\_\_ Date of Birth Social Security No.\* Driver's License/I.D. No. Issuing State

**PASSPORT INFORMATION:** \_\_\_\_\_  
Date Issued Passport Number Issuing Country

**MAILING ADDRESS:** *(All correspondence will be mailed to this address.)*

\_\_\_\_\_ Street Address/P.O. Box Apt. No City State Zip Code

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

### NAME & TELEPHONE NUMBER OF A PERSON WHO CAN CONTACT YOU:

\_\_\_\_\_ Name Relationship Telephone Number

### CHECK ONE:

- I intend to practice as a Foreign Legal Consultant in Texas and to maintain an office in Texas for that purpose. (See Rule XIV(1)(a)).
- I intend to practice as a Foreign Legal Consultant in Texas only as an in-house counsel on behalf of an individual, corporation, limited liability company, partnership, association, nonprofit entity, or governmental agency whose primary business is *not* the provision of legal services to the public. (See Rule XIV(1)(b)).

List each city, including any in Texas, and state, and/or foreign country where you have resided, worked, or attended school for three (3) consecutive months or longer during the last ten (10) years. Use a Continuation Form if necessary. **Do not answer "N/A" for this item.**

<u>From (mm/yy)</u>	<u>To (mm/yy)</u>	<u>City, State (and Foreign County, if applicable)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_ **Check here if a Continuation Form is attached.**

\* The provision of your social security number is voluntary, pursuant to Sec. 7, Privacy Act of 1974. However, when this data is provided, the Board will use it in its investigation and verification, to minimize errors of identity, which might introduce problems and delays into the certification and licensure process. The Board appreciates

1. Have you been known by any other name or surname? ..... \_\_\_\_\_  
(yes or no)

If you answered "YES", give the following information:

Other Complete Name	Duration of Use	Explanation of change
_____	_____	_____
_____	_____	_____

2. List the name of each law school you have attended or are now attending (either for a J.D. or an advanced degree). Use a Continuation Form if you have attended more than one law school. **If your law degree was obtained from a law school in a foreign nation, you must include the fax number and email address for the appropriate individual at your law school who can verify your law degree.**

Law School Name & Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Degree: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

3. List all state, federal, and/or foreign jurisdictions where you have been licensed or authorized to practice law. If you are licensed in more than three (3) states and/or federal jurisdictions, use a Continuation Form. If not applicable, write N/A.

**If you are licensed or authorized to practice law in a foreign nation, you must include the fax number and email address for the appropriate individual at the licensing entity in that foreign nation that can verify your law license or authorization.**

Jurisdiction where admitted	Admission Date (mm/dd/yy)	Status (Active or Inactive)
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(a) \_\_\_\_\_

Have you ever been inactive in this jurisdiction? \_\_\_\_\_ If "yes" enter the dates license was inactive: \_\_\_\_\_  
(yes or no) mm/dd/yy-mm/dd/yy

Fax Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

(b) \_\_\_\_\_

Have you ever been inactive in this jurisdiction? \_\_\_\_\_ If "yes" enter the dates license was inactive: \_\_\_\_\_  
(yes or no) mm/dd/yy-mm/dd/yy

Fax Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

(c) \_\_\_\_\_

Have you ever been inactive in this jurisdiction? \_\_\_\_\_ If "yes" enter the dates license was inactive: \_\_\_\_\_  
(yes or no) mm/dd/yy-mm/dd/yy

Fax Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

4. Are you presently a resident of the state of Texas?

\_\_\_\_\_   
 yes or no

If you answered "YES" to **Question 4**, provide your residential address in the space below

\_\_\_\_\_   
 \_\_\_\_\_

5. Have you ever been disciplined in any way for any matter by any college, university, law school or other institution of higher learning, or by any professor, administrator, employee or entity representing any college, university, law school or other institution of higher learning, or have you been allowed to withdraw from such an institution to avoid such discipline, whether or not the record of such action was retained in your file? (Discipline includes, without limitation, a letter or other written notice of reprimand or warning, suspension, expulsion, adjustment of grade, assignment of community service, any form of probation, or any other adverse action). (Entity includes, without limitation, residential facilities or other facilities owned or managed by a college, university, law school or other institution of higher learning.)

\_\_\_\_\_   
 yes or no

If you answered "YES" to **Question 5**, provide a narrative explanation on a Continuation Form, and provide copies of all relevant documents.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

6. During the last ten (10) years or since your 18<sup>th</sup> birthday, whichever time period is shorter, have you been terminated, suspended, disciplined, or permitted to resign in lieu of termination, suspension, or discipline, from any job or employment?

\_\_\_\_\_   
 yes or no

If you answered "YES" to Question 6, provide a narrative explanation on a Continuation Form of the circumstances surrounding each such occurrence.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

7. Beginning with your current or most recent employment, list all employment (including self-employment, externships, paid and unpaid internships, clerkships, part-time employment, and temporary employment you have held for any period during the last ten (10) years. Refer to the Special Notice regarding the requirements for self-employment. Attach a copy of your employer's official job description for each position held. Use the attached Employment Form if additional space is needed. **Use the enclosed Employment Form (on page 19) if you list more than two (2) employers.** See Instruction 13 (page iii) for additional guidance in providing employment data.

(a) **Name of Employer:** \_\_\_\_\_

Current address: \_\_\_\_\_  
Street/P.O. Box City State/Country Zip/Postal Code

Telephone number: \_\_\_\_\_ Dates employed: \_\_\_\_\_  
Area Code From (mm/dd/yy) To (mm/dd/yy)

Position Held: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Fax number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**If you are applying under Rule XIV(1)(b)(1)(C), and if this was law practice employment, answer the following:**

- a. During this employment, were you exclusively engaged in the practice of law? \_\_\_\_\_(yes or no)
- b. Was this employment on a full-time basis? \_\_\_\_\_(yes or no)
- c. Do you affirm that this employment involved no responsibilities that might be deemed non-legal, administrative, or executive? \_\_\_\_\_(yes or no)
- d. Do you affirm that you performed no functions that could have been delegated to a non-lawyer? \_\_\_\_\_(yes or no)
- e. Is the employer's job description of your position attached? \_\_\_\_\_(yes or no)

**If you answered "no" to a, b, c or d, attach a detailed explanation including the amount of time spent monthly actually rendering legal services; a description of any non-legal, administrative or executive responsibilities or functions and the amount of time spent monthly in carrying them out.**

**If this employment is/was self-employment, or if the employer is now out of business, provide the name, current mailing address and telephone number of a verifying reference.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street/P.O. Box City State/Country Zip/Postal Code

Daytime telephone number: \_\_\_\_\_  
Area Code

Fax number: \_\_\_\_\_ Email Address: \_\_\_\_\_

(b) **Name of Employer:** \_\_\_\_\_

Current address: \_\_\_\_\_  
Street/P.O. Box City State/Country Zip/Postal Code

Telephone number: \_\_\_\_\_ Dates employed: \_\_\_\_\_  
Area Code From (mm/dd/yy) To (mm/dd/yy)

Position Held: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Fax number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**If you are applying under Rule XIV(1)(b)(1)(C), and if this was law practice employment, answer the following:**

- a. During this employment, were you exclusively engaged in the practice of law? \_\_\_\_\_ (yes or no)
- b. Was this employment on a full-time basis? \_\_\_\_\_ (yes or no)
- c. Do you affirm that this employment involved no responsibilities that might be deemed non-legal, administrative, or executive? \_\_\_\_\_ (yes or no)
- d. Do you affirm that you performed no functions that could have been delegated to a non-lawyer? \_\_\_\_\_ (yes or no)
- e. Is the employer's job description of your position attached? \_\_\_\_\_ (yes or no)

**If you answered "no" to a, b, c or d, attach a detailed explanation including the amount of time spent monthly actually rendering legal services; a description of any non-legal, administrative or executive responsibilities or functions and the amount of time spent monthly in carrying them out.**

**If this employment is/was self-employment, or if the employer is now out of business, provide the name, current mailing address and telephone number of a verifying reference.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street/P.O. Box City State/Country Zip/Postal Code

Daytime telephone number: \_\_\_\_\_  
Area Code

Fax number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
**(Fax Number and Email Address required only if licensed or employed in a foreign nation)**

\_\_\_\_\_ **Check here if an *Employment Form* and/or a *Continuation Form* is attached relating to Question 7.**

- 8.(a) Within the last ten (10) years, have you been a party to any civil suit or proceeding (including but not limited to any matters in which you were the subject of a proceeding for commitment based on incompetency, mental health, or substance abuse)? \_\_\_\_\_  
yes or no

If you answered “YES” to **Question 8(a)**, attach a separate *Civil Litigation Form* for each matter. On each Form, indicate in the “Disposition” Section whether the matter has been concluded or is still pending.

If you are, or were, a plaintiff, you must complete the Form, but you are not required to attach any documentation.

If you were a defendant in a matter that has been concluded, attach a legible copy of the docket sheet. If a judgment was rendered against you, attach a legible copy of the judgment and proof of satisfaction, if applicable. Provide an explanation if the judgment has not been satisfied. If the matter resulted in a settlement, provide a summary of the terms as they relate to you and a statement as to whether you adhered to same.

If you are a defendant in a matter that is pending, attach a legible copy of the docket sheet and a legible copy of the most recent petition/complaint.

\_\_\_\_\_ **Check here if a *Civil Litigation Form* is attached.**

- (b) Have you ever been convicted of an offense, placed on probation, or granted deferred adjudication or any type of pretrial diversion? You must report any such offenses involving alcohol or drugs. You must report any failure to appear conviction resulting from any offense. You must report any conviction for failure to maintain financial responsibility (legally required auto insurance). You may exclude only Class C misdemeanor traffic violations. \_\_\_\_\_  
yes or no

- (c) Have you, within the last (10) years, been arrested, cited or ticketed for, or charged with any violation of the law? You must report any such offenses involving alcohol or drugs. You must report any failure to appear charge or warrant resulting from any such offense. You must report any failure to maintain financial responsibility (legally required auto insurance) arrest, citation, ticket or charge. You may exclude only Class C misdemeanor traffic violations. \_\_\_\_\_  
yes or no

If you answered “YES” to **Question 8(b) or (c)**, attach a separate *Criminal History Form* for each arrest, charge, citation, or ticket.

**Arrest/offense reports:** If any of the offenses you describe resulted from an arrest (as opposed to a citation or a ticket) that occurred within five years of the date you sign this Application, you are responsible for either providing legible copies of the arrest/offense reports for such offenses, or providing proof that you made a written request for such reports. You are not required to provide copies of citations or tickets.

**Court records:** If any of the offenses you describe, whether they resulted from an arrest, citation or ticket, occurred within five years of the date you sign this Application, you are responsible for either providing legible copies of all court records for all such offenses, or providing proof that you made a written request for such court records.

It is very important that you make your written requests to the **correct** agency or court.

\_\_\_\_\_ **Check here if a *Criminal History Form* is attached.**

**NOTE:** If you have ever been convicted of a felony, or have been placed on probation for a felony, with or without an adjudication of guilt, read Rule IV(d) carefully. You may be prohibited from filing this form.

**NOTE: Expunged and Sealed Offenses:** Matters expunged pursuant to Texas Code of Criminal Procedure Art. 55.02, or pursuant to another State’s statute with the same force and effect, need not be disclosed. While expunged or sealed offenses, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, ticket, or citation has, in fact, been expunged or sealed. It is recommended that you obtain a copy of the Court Order expunging or sealing the record in question. Failure to reveal an offense, arrest, ticket, or citation that is not in fact expunged or sealed, raises questions related to truthfulness in addition to questions regarding the offense itself.

**NOTE: Orders of Non-Disclosure:** Pursuant to the Govt. Code [Sec. 552.142 (b)], if you have criminal matters that are the subject of an order of non-disclosure you are not required to reveal those criminal matters on this form. However, a criminal matter that is the subject of an order of non-disclosure **may become a character and fitness issue**. Pursuant to other sections of the Government Code [411.081(d), 411.081(i)(5), 411.083(b), 411.084(a), 411.087(a), and 411.100], the Texas Board of Law Examiners is entitled to access criminal history record information that is the subject of an order of non-disclosure. Therefore, if the Board of Law Examiners discovers a criminal matter that is the subject of an order of non-disclosure, even if you properly did not reveal that matter, the Board of Law Examiners may ask you to provide information about that criminal matter.

(d) Are you currently the target or subject of a grand jury or other governmental agency investigation? \_\_\_\_\_  
yes or no

If you answered “YES” to **Question 8(d)**, provide details on a *Continuation Form*.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

(e) Within the last ten (10) years, have you filed or been the subject of a petition in bankruptcy? \_\_\_\_\_  
yes or no

(1) Were there any allegations of fraud or mismanagement of funds? \_\_\_\_\_

yes or no

(2) Were any adversary proceedings instituted? \_\_\_\_\_

yes or no

If you answered “YES” to **any part of Question 8(e)**, attach a *Continuation Form* on which you provide details as to your response, including the final or current disposition of the matter. In addition, provide legible copies of the bankruptcy petition, all schedules, discharge order (if applicable), and other pleadings relevant to your responses. If you filed a Chapter 7 Petition that resulted in a discharge, include a statement as to whether any of your scheduled debts were **not** discharged.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

(f) Within the last ten (10) years, have you been charged with fraud or alleged to have committed fraud in any criminal or civil proceeding? \_\_\_\_\_  
yes or no

If you answered “YES” to **Question 8(f)**, attach a *Continuation Form* on which you provide details as to your response. In addition, provide legible copies of relevant court documents, including pleadings and orders relating to the fraud allegations.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

9. Within the last ten (10) years, have you abused, been addicted to, or been treated for the use or abuse of alcohol or any other substance, to include any court-ordered treatment? \_\_\_\_\_  
yes or no

If you answered “YES” to **Question 9**, provide details on a *Continuation Form*. Include the dates of treatment and the name, current mailing address, and telephone number of each person who provided evaluation or treatment, as well as the dates of treatment and the name, current mailing address, and telephone number of each facility where you received treatment.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

10. If you have received mental health counseling or have been hospitalized for mental health reasons and do not know the diagnosis which was made, you should contact the health care provider responsible for your care and inquire as to whether you were diagnosed with bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder. In answering the following questions, you are entitled to rely on the diagnosis of your treating health care provider. You do not need to report any counseling, treatment, or hospitalization which was for a diagnosis other than those included in the following questions.

A “yes” response to either of the following questions does not mean necessarily that you will be found to lack the fitness required for admission to the Bar. The Board is sensitive to confidentiality concerns. Please refer to Rule I (d) of the *Rules Governing Admission to the Bar of Texas* concerning confidentiality.

- (a) Within the last ten (10) years, have you been diagnosed with, or have you been treated for, bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder? \_\_\_\_\_  
yes or no
- (b) Within the last ten (10) years, have you been admitted to a hospital or other facility for the treatment of bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder? \_\_\_\_\_  
yes or no

If you answered “YES” to any part of **Question 10**, provide details on a *Continuation Form*. Include date(s) of diagnosis and treatment, a description of your course of treatment and a description of your present condition. Include the name, current mailing address, and telephone number of each person who treated you, as well as each facility where you received treatment, and the reason for each treatment.

You may also include information as to why, in your opinion or that of your health care provider, your illness or disorder will not affect your ability to practice law in a competent and professional manner.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

- 11.(a) Have you **ever** been ordered by a court to pay child support? \_\_\_\_\_  
yes or no

If you answered “YES” to **Question 11(a)**, attach a *Continuation Form* on which you provide the name, current mailing address, and telephone number of the payee and the office (if any) receiving your payments. In addition, provide legible copies of relevant documents (including court orders and agreements incident to divorce).

- (b) Are you now, or have you been within the period covered, past due in any such court-ordered child support payments? \_\_\_\_\_  
yes or no

- (c) Have you **ever** had an arrearage judgment taken against you? \_\_\_\_\_  
yes or no

If you answered “YES” to **Question 11(b) or (c)**, explain your response on a *Continuation Form*. In addition, provide legible copies of relevant documents, including court orders.



\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

12. Have you **ever** been held in contempt or sanctioned by a court? \_\_\_\_\_

yes or no

If you answered "YES" to **Question 12**, explain your response on a *Continuation Form* and provide legible copies of the court order(s).

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

13.(a) Do you have any student loan debts that are ninety (90) days or more past due? \_\_\_\_\_

yes or no

If you answered "YES" to **Question 13(a)**, attach a *Continuation Form* on which you provide the name, mailing address, and telephone number of the creditor(s), the amount owed, the account number, the reason for the delinquency, and your intentions as to the resolution of the debt.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

(b) Do you have any other debts that are ninety (90) days or more past due (including tax debts owed pursuant to state or federal law)? \_\_\_\_\_

yes or no

If you answered "YES" to **any part of Question 13**, provide a **current credit report from EXPERIAN (1-888-397-3742 or you may obtain a report from the Internet at [www.experian.com](http://www.experian.com))**. When you provide a credit report, list any debts you dispute and explain why you dispute them. Also, list any debts that are ninety (90) days or more past due that are not shown on the credit report.

14.(a) **Within the last ten (10) years**, have you failed to timely file any applicable state or federal income tax return and/or report required by law? \_\_\_\_\_

yes or no

(b) **Within the last ten (10) years**, have you failed to pay any taxes owed pursuant to state or federal law at the time such taxes were due? \_\_\_\_\_

yes or no

(c) **Within the last ten (10) years**, have you collected federal withholding, social security, or Medicare taxes from the wages of your employees, and failed to timely report and forward such monies to the Internal Revenue Service? \_\_\_\_\_

yes or no

If you answered "YES" to **any part of Question 14**, attach a *Continuation Form*, providing details. In addition, furnish copies of all correspondence related to the matter(s) covered in your explanation.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

15.(a) Do you currently have an application for admission to the bar, or an application to take a bar examination, pending in another jurisdiction? \_\_\_\_\_

yes or no

(b) Have you **ever** initiated the process to become licensed to practice law, or have you **ever** filed an application to take a bar examination, in any jurisdiction (including Texas) and were not licensed in that jurisdiction? (This question does **not** refer to applications to law schools.) \_\_\_\_\_

yes or no

- (c) Have you **ever** filed a law student registration document in any jurisdiction and were not ultimately licensed in that jurisdiction? (This question does **not** refer to applications to law schools.) \_\_\_\_\_  
yes or no

If you answered “YES” to any **part of Question 15**, provide details on a *Continuation Form*, including the jurisdiction, dates, and other details.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

- 16.(a) Within the last ten (10) years, have you applied for any professional or occupational (other than as a licensed attorney as indicated to Question 3)? \_\_\_\_\_  
yes or no

- (b) Have you **ever** been licensed in any professional or occupational capacity (other than as a licensed attorney as indicated to Question 3)? \_\_\_\_\_  
yes or no

If you answered “YES” to **Question 16(a) or (b)** provide details on a *Continuation Form*, including license held, or applied for, date issued, and the name, address and telephone number of the licensing authority. If the license was not issued, please explain.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

- (c) Have you **ever** been disbarred, suspended from practice, disciplined, disqualified, placed on a diversion program, or allowed to resign in lieu of disciplinary action, or has your license **ever** been qualified or conditioned in any way, as a member of any profession, licensed occupation, or as the holder of any public office? \_\_\_\_\_  
yes or no

**NOTE:** If you have been disciplined for professional misconduct in the course of practicing law, or if you have resigned a law license in lieu of disciplinary action, read Rule IV(e) carefully. You may be prohibited from filing this form.

- (d) Have there **ever** been any formal or informal charges, complaints, or grievances filed (regardless the outcome) concerning your conduct as a member of any profession, licensed occupation, or as the holder of any public office? \_\_\_\_\_  
yes or no

- (e) Are there now pending any formal or informal charges, complaints, or grievances concerning your conduct as a member of any profession, licensed occupation, or as the holder of any public office? \_\_\_\_\_  
yes or no

If you answered “YES” to **Question 16(c), (d), or (e)**, provide a narrative statement of the details (stating dates, names and circumstances) on a *Continuation Form*. Include the name and mailing address of the disciplinary authority in possession of the records of such incidents.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

17. **Within the last ten (10) years**, have you been the subject of an investigation for the unauthorized practice of law? \_\_\_\_\_  
yes or no

If you answered “YES” to **Question 17**, provide details on a *Continuation Form*, including the name, address, and telephone number of the entity and/or person who conducted the investigation.

\_\_\_\_\_ **Check here if a *Continuation Form* is attached.**

18. List six (6) character references who can give information about your past activities and candid opinions concerning your character. Do not list relatives, persons with whom you attended law school in the past 5 years or any person named in your response to Questions 7, 19, or 20.

(a)

Name	Email Address	Daytime phone number	
Street Address/P.O.Box	City	State/Country	Zip/Postal Code

(b)

Name	Email Address	Daytime phone number	
Street Address/P.O.Box	City	State/Country	Zip/Postal Code

(c)

Name	Email Address	Daytime phone number	
Street Address/P.O.Box	City	State/Country	Zip/Postal Code

(d)

Name	Email Address	Daytime phone number	
Street Address/P.O.Box	City	State/Country	Zip/Postal Code

(e)

Name	Email Address	Daytime phone number	
Street Address/P.O.Box	City	State/Country	Zip/Postal Code

(f)

Name	Email Address	Daytime phone number	
Street Address/P.O.Box	City	State/Country	Zip/Postal Code

19. List two (2) attorney references, **excluding relatives and persons with whom you attended law school**. The names provided here must be different from those provided in item numbers 7, 18, or 20. We will ask these references to give information about your past activities and candid opinions concerning your character.

(a)

Name	Email Address	Daytime phone number	
Street Address/P.O.Box	City	State/Country	Zip/Postal Code

(b)

Name	Email Address	Daytime phone number	
Street Address/P.O.Box	City	State/Country	Zip/Postal Code

20. List two (2) client references, **excluding relatives and persons with whom you attended law school**. **If you have not had any clients, substitute the names of two law professors or other attorneys.** The names provided here must be different from those provided in item numbers 7, 18, or 19. We will ask these references to give information about your past activities and candid opinions concerning your character. **(Please circle the type of reference under each name.)**

(a)

Name	Email Address	Daytime phone number	
Street Address/P.O.Box	City	State/Country	Zip/Postal Code

(b)

Name	Email Address	Daytime phone number	
Street Address/P.O.Box	City	State/Country	Zip/Postal Code

21. If you have not enclosed certain required documentation that must be obtained from third parties, you must make a good faith effort to provide that documentation to the Board within thirty (30) days. **If applicable, list on a Continuation Form any documentation you have not provided.**

\_\_\_\_\_ Check here if a *Continuation Form* is attached.

**AFFIDAVIT**

Before me, a Notary Public, on this day personally appeared \_\_\_\_\_,  
who after being duly sworn by me, declared:  **(Applicant's Full Name)**

“I have read the instructions and inquiries that constitute the Application for Certification as a Foreign Legal Consultant. No revisions or alterations have been made to the text of any inquiry on this form. I have responded to all inquiries on this form fully and frankly, and all the information contained in my application (including any required *Continuation Form, Criminal History Form, Civil Litigation Form, Employment Form,* or any other information) is true and correct. All documents that I have provided or will provide to the Board, that are not required to be certified copies, are to the best of my knowledge, true and correct copies of the original documents.

“I understand that the purpose of all the inquiries in this application is to provide to the Board of Law Examiners sufficient information for its investigation as to my present moral character and fitness and my eligibility for certification. I further understand that the fact that the application form inquires about a particular matter does not mean that the matter is conclusive as to my present moral character and fitness. I understand that the Board’s inquiries and investigation will cover matters that may or may not be grounds for finding that I lack the present good moral character and fitness required for certification as a Foreign Legal Consultant in the State of Texas.

“I have read the current version of the *Rules Governing Admission to the Bar of Texas* and the statutes governing the Board of Law Examiners found in Texas Government Code, Sec. 82.001 et seq. I understand that, until I am certified as a Foreign Legal Consultant in the State of Texas, it is my responsibility to read any subsequent amendments to the Rules Governing Admission to the Bar of Texas, as well as any subsequent amendments to Sec. 82.001 et seq., Texas Government Code, regardless of whether such amendments are adopted after the filing of this document.

“I have read the *Texas Disciplinary Rules of Professional Conduct*, as shown at [www.txethics.org/Rules.aspx](http://www.txethics.org/Rules.aspx). I will abide by the *Texas Disciplinary Rules of Professional Conduct* and any amendments or changes thereto if I am certified as a Foreign Legal Consultant in the State of Texas.

“I seek certification as a Foreign Legal Consultant in Texas pursuant to the requirements imposed by the *Rules Governing Admission to the Bar of Texas*. Having read the *Rules Governing Admission to the Bar of Texas* and the information and instructions included with this application, I am submitting my application in the good faith belief that I am eligible for certification as a Foreign Legal Consultant in the State of Texas. I know of no reason why I would not be qualified for certification. I understand that the responses submitted on this application and all attendant forms are submitted under oath, and that failure to respond to any inquiry or to disclose fully and accurately any facts or information called for herein may result in a finding that I do not have the present good moral character and/or fitness required for certification as a Foreign Legal Consultant in the State of Texas.

“I am aware that until I am certified as a Foreign Legal Consultant, I am under an on-going obligation to update my responses on my Application whenever there is an addition or change to information previously provided to the Board. I will notify the Board, in writing, within 30 days of the occurrence giving rise to the need to add or to change information previously provided and will promptly furnish any additional documentation requested by the Board in connection therewith.

“I am aware that I have a duty to, and I agree that I will, advise the Board in writing of any change of address and telephone number, even if such change is only for the summer months, so that the Board can contact me at any time if the need arises. I affirm that I have received, with my application form, a change of address form which I can use for this purpose, and that I will keep the Board apprised of my address and telephone number at all times.

“I further depose that, having submitted the foregoing application using the Board’s web version, no revisions or alterations have been made to the text or questions contained therein; and that if revisions or alterations are made, it is understood by me that the supplemental investigation may be denied, or, if granted, may be revoked, and all fees forfeited.”

\_\_\_\_\_  
***Signature of Applicant***

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**(Seal)**

\_\_\_\_\_  
Signature of Notary

My Commission expires: \_\_\_\_\_

**Sponsor Information**

Printed Name of Sponsoring Member of the Texas Bar: \_\_\_\_\_

Date Licensed: \_\_\_\_\_

Texas Bar Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**(Seal)**

\_\_\_\_\_  
Signature of Notary

My Commission expires: \_\_\_\_\_





**CRIMINAL HISTORY FORM**

(Use a **separate form** for each incident requiring a *Criminal History Form*. Make additional copies of this form as needed.)

Arrest/offense reports: If any of the offenses you describe resulted from an arrest (as opposed to a citation or a ticket) that occurred within five years of the date you sign this Application, you are responsible for either providing legible copies of the arrest/offense reports for such offenses, or providing proof that you made a written request, to the appropriate entity, for such reports. You are not required to provide copies of any citation or tickets.

Court records: If any of the offenses you describe, whether they resulted from an arrest, citation, or ticket, occurred within five years of the date you sign this Application, you are responsible for either providing legible copies of all court records for all such offenses, or providing proof that you made a written request, to the appropriate entity, for such court records.

NAME: \_\_\_\_\_  
Last First Middle

Date of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_  
City County/State/Country

Arresting/Ticketing Agency: \_\_\_\_\_  
Name of Agency

\_\_\_\_\_  
Mailing Address City State/Country Zip/Postal Code

**Detailed Summary** of the events and circumstances leading to this arrest, citation, ticket, and/or criminal charge: (Use *Continuation Form*, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CHARGES. For each charge, indicate whether it was a misdemeanor or a felony:**

Initial Charge(s): \_\_\_\_\_ Misdemeanor \_\_\_\_\_ Felony

Ultimate Charge (s): \_\_\_\_\_ Misdemeanor \_\_\_\_\_ Felony

Plea: \_\_\_\_\_

Disposition: (If probation, deferred adjudication, or deferred prosecution, give summary.) \_\_\_\_\_

Style and Cause Number(s): \_\_\_\_\_

Title of Court: \_\_\_\_\_

Mailing Address of Court: \_\_\_\_\_

Name and address of your legal counsel in this case, if any: \_\_\_\_\_

\_\_\_\_\_



**EMPLOYMENT FORM**

(Make additional copies of this form as needed.)

Name of Employer: \_\_\_\_\_

Current address: \_\_\_\_\_  
Street/P.O. Box City State/Country Zip/Postal Code

Telephone number: \_\_\_\_\_ Dates employed: \_\_\_\_\_  
Area Code From (mm/dd/yy) To (mm/dd/yy)

Position Held: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Fax number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
**(Fax Number and Email Address required only if licensed or employed in a foreign nation)**

**If this was law practice employment, answer the following:**

- a. During this employment, were you exclusively engaged in the practice of law? \_\_\_\_\_ (yes or no)
- b. Was this employment on a full-time basis? \_\_\_\_\_ (yes or no)
- c. Do you affirm that this employment involved no responsibilities that might be deemed non-legal, administrative, or executive? \_\_\_\_\_ (yes or no)
- d. Do you affirm that you performed no functions that could have been delegated to a non-lawyer? \_\_\_\_\_ (yes or no)
- e. Is the employer's job description of your position attached? \_\_\_\_\_ (yes or no)

If you answered "no" to a, b, c or d, attach a detailed explanation including the amount of time spent monthly actually rendering legal services; a description of any non-legal, administrative or executive responsibilities or functions and the amount of time spent monthly in carrying them out.

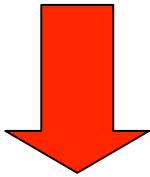
**If this employment is/was self-employment, or if the employer is now out of business, provide the name, current mailing address and telephone number of a verifying reference.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street/P.O. Box City State/Country Zip/Postal Code

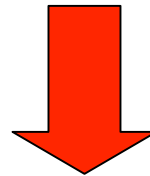
Daytime telephone number: \_\_\_\_\_  
Area Code

Fax number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
**(Fax Number and Email Address required only if licensed or employed in a foreign nation)**



# Board of Law Examiners

Appointed by the Supreme Court of Texas



## Authorization and Release

I, \_\_\_\_\_, born in \_\_\_\_\_  
*(Applicant's Full Name)* *(City / State / Country)*

hereby give my consent to the Board of Law Examiners to conduct an investigation as to my moral character and fitness and to make inquiries and request such information from third parties as, in the sole discretion of the Board, is necessary to such investigation. I further authorize the use of any such information in the course of the Board's investigation and evaluation of my moral character and fitness.

I authorize and request every person, firm, company, corporation, school, employer (past or present), governmental agency, court, association, institution, or other third party having opinions about me or knowledge or control of any information, documents, records (including but not limited to public or private disciplinary records, criminal history record information, medical or psychological records), or other data pertaining to me, to reveal, furnish and release to the Board of Law Examiners of the State of Texas, or any of its agents or representatives, any such opinions, knowledge, information, documents, records or other data. Without limiting the previously described authority, I specifically authorize the release of files of any bar association, grievance or other bar committee regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data, as well as all undergraduate, graduate, or law school records relating to my admission to and conduct during my enrollment in such schools.

I hereby release, discharge and hold harmless the Board of Law Examiners of the State of Texas, its agents or representatives (including but not limited to expert witnesses or evaluators consulted or used by the Board or its staff in the course of its investigation), and any person, firm, company, corporation, school, employer (past or present), governmental agency, court, association, institution, or other third party, and their agents, from any and all liability of every nature and kind arising out of the furnishing, inspection, and use of such opinions, knowledge, documents, records or other data.

Notwithstanding any statement herein to the contrary, this Authorization and Release shall operate to agree to the release of only those mental health records relating to the following:

- (a) my being diagnosed with bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder, and any treatment therefor, within the ten (10) years immediately preceding the filing of my Application with the Board of Law Examiners; and
- (b) my admission to a hospital or other facility for the treatment of bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder, since attaining the age of eighteen or within the ten (10) years immediately preceding the filing of my Application, whichever period is shorter.

This limitation, however, does not apply to records relating to chemical dependency.

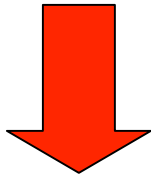
\_\_\_\_\_  
*Signature of Applicant*

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**(Seal)**

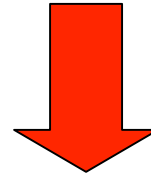
\_\_\_\_\_  
Signature of Notary

My Commission expires: \_\_\_\_\_



# Board of Law Examiners

Appointed by the Supreme Court of Texas



## Authorization and Release

I, \_\_\_\_\_, born in \_\_\_\_\_  
*(Applicant's Full Name)* *(City / State / Country)*

hereby give my consent to the Board of Law Examiners to conduct an investigation as to my moral character and fitness and to make inquiries and request such information from third parties as, in the sole discretion of the Board, is necessary to such investigation. I further authorize the use of any such information in the course of the Board's investigation and evaluation of my moral character and fitness.

I authorize and request every person, firm, company, corporation, school, employer (past or present), governmental agency, court, association, institution, or other third party having opinions about me or knowledge or control of any information, documents, records (including but not limited to public or private disciplinary records, criminal history record information, medical or psychological records), or other data pertaining to me, to reveal, furnish and release to the Board of Law Examiners of the State of Texas, or any of its agents or representatives, any such opinions, knowledge, information, documents, records or other data. Without limiting the previously described authority, I specifically authorize the release of files of any bar association, grievance or other bar committee regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data, as well as all undergraduate, graduate, or law school records relating to my admission to and conduct during my enrollment in such schools.

I hereby release, discharge and hold harmless the Board of Law Examiners of the State of Texas, its agents or representatives (including but not limited to expert witnesses or evaluators consulted or used by the Board or its staff in the course of its investigation), and any person, firm, company, corporation, school, employer (past or present), governmental agency, court, association, institution, or other third party, and their agents, from any and all liability of every nature and kind arising out of the furnishing, inspection, and use of such opinions, knowledge, documents, records or other data.

Notwithstanding any statement herein to the contrary, this Authorization and Release shall operate to agree to the release of only those mental health records relating to the following:

- (a) my being diagnosed with bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder, and any treatment therefor, within the ten (10) years immediately preceding the filing of my Application with the Board of Law Examiners; and
- (b) my admission to a hospital or other facility for the treatment of bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder, since attaining the age of eighteen or within the ten (10) years immediately preceding the filing of my Application, whichever period is shorter.

This limitation, however, does not apply to records relating to chemical dependency.

\_\_\_\_\_  
*Signature of Applicant*

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**(Seal)**

\_\_\_\_\_  
Signature of Notary

My Commission expires: \_\_\_\_\_

# ATTORNEYS – COMPLETE THIS

## Eligibility Verification Questionnaire And Request For Documentation

This form must be completed by any applicant for admission who is licensed to practice law in any jurisdiction in the United States or in a foreign nation. Type or print your answers to the following questions on this form. If you require additional space for an answer, use a separate sheet clearly identified as to the question to which it applies.

### USE OF BUSINESS CARDS AND LETTERHEAD:

I.	<p><b>Within the past seven years or since you have been licensed to practice law in any jurisdiction (whichever period is shorter), have you had or used business cards?</b></p> <p>If you answered “yes,” attach a sample of each such business card and indicate the time period during which each was used.</p>	<p>_____</p> <p>yes or no</p>
II.	<p><b>Within the past seven years or since you have been licensed to practice law in any jurisdiction (whichever period is shorter), have you had or used attorney, firm or company letterhead?</b></p> <p>If you answered “yes,” attach a sample of each such attorney, firm, or company letterhead and indicate the time period during which each was used.</p>	<p>_____</p> <p>yes or no</p>

### IN-HOUSE/CORPORATE COUNSEL PRACTICE: (See Policy Statement, Paragraph I-A.)

III.	<p><b>Have you been employed in Texas as in-house/corporate counsel for a corporation or other entity?</b></p> <p>If you answered “no,” you may skip to Question IV.</p>	<p>_____</p> <p>yes or no</p>
A.	<p>At all times during such employment, did you hold a valid, active law license issued by another state (including any territory of the United States, as well as the District of Columbia)?</p>	<p>_____</p> <p>yes or no</p>
B.	<p>At any time during such employment, did you render to anyone, except your employer, any service requiring the use of legal skill or knowledge or perform any other act constituting the practice of law as defined in Tex. Gov. Code Sec. 81.101 (set out below)?</p> <p><i>[T]he practice of law means the preparation of a pleading or other document incident to an action or special proceeding or the management of the action or proceeding on behalf of a client before a judge in court, as well as a service rendered out of court, including the giving of advice or the rendering of any service requiring the use of legal skill or knowledge, such as preparing a will, contract, or other instrument, the legal effect of which under the facts and conclusions involved must be carefully determined.</i></p> <p>If you answered “yes,” provide on a separate sheet or sheets of paper the following information about each such matter handled:</p> <ol style="list-style-type: none"> <li>a. brief description of client matter (such as divorce, probate of estate, contract review, etc.);</li> <li>b. inclusive dates of such advice, representation, or services rendered;</li> <li>c. list of every judicial or administrative trial or proceeding in which you appeared for or represented the client;</li> <li>d. a statement of why you believe you were authorized to undertake this practice of the law in Texas without being admitted to the Texas Bar as required by Sec. 81.102, Tex. Govt. Code Sec. 81.102.and</li> <li>e. a copy of the docket sheet for every Texas state court or administrative proceeding in which you provided such services.</li> </ol>	<p>_____</p> <p>yes or no</p>

**MILITARY ATTORNEY PRACTICE:** (See Policy Statement, Paragraph I-B.)

IV.	<p><b>Have you been employed in Texas as a military attorney with the United States Armed Forces?</b></p> <p>If you answered “no,” you may skip to Question V.</p>	<p>_____</p> <p>yes or no</p>
A.	<p>At all times during such employment, did you hold a law license issued by another state (including any territory of the United States, as well as the District of Columbia)?</p>	<p>_____</p> <p>yes or no</p>
B.	<p>At any time during such employment, did you render to anyone, except to those persons permitted within the scope of your employment duties with the military, any service requiring the use of legal skill or knowledge or perform any other acts constituting the practice of law as defined in Tex. Gov. Code Sec. 81.101 (see definition in Question III)?</p> <p>If you answered “yes,” please provide on a separate sheet or sheets of paper the following information about each such matter handled:</p> <ul style="list-style-type: none"> <li>a. brief description of client matter (such as divorce, probate of estate, contract review, etc.);</li> <li>b. inclusive dates of such advice, representation, or services rendered;</li> <li>c. list of every judicial or administrative trial or proceeding in which you appeared for or represented the client;</li> <li>d. a statement of why you believe you were authorized to undertake this practice of the law in Texas without being admitted to the Texas Bar as required by Sec. 81.102, Tex. Govt. Code Sec. 81.102.and</li> <li>e. a copy of the docket sheet for every Texas state court or administrative proceeding in which you provided such services.</li> </ul>	<p>_____</p> <p>yes or no</p>

**GENERAL QUESTIONS REGARDING PRACTICE IN TEXAS:** (See Sec. 81.101(a) Texas Government Code.)

V.	<p><b>Have you ever practiced law in Texas, other than as an in-house/corporate counsel for a corporation or other entity, or as a military attorney with the United States Armed Forces?</b></p> <p>If you answered “no,” skip to Question VI.</p> <p>If you answered “yes” to Question V, provide on a separate sheet or sheets of paper the following information about each such matter handled:</p> <ul style="list-style-type: none"> <li>a. brief description of client matter (such as divorce, probate of estate, contract review, etc.);</li> <li>b. inclusive dates of such advice, representation, or services rendered;</li> <li>c. list of every judicial or administrative trial or proceeding in which you appeared for or represented the client;</li> <li>d. a statement of why you believe you were authorized to undertake this practice of the law in Texas without being admitted to the Texas Bar as required by Sec. 81.102, Tex. Govt. Code Sec. 81.102.</li> </ul>	<p>_____</p> <p>yes or no</p>
A.	<p>Did such practice consist exclusively of federal law?</p>	<p>_____</p> <p>yes or no</p>
B.	<p>If such practice consisted exclusively of federal law, did you hold a valid law license issued by another state (including any territory of the United States, as well as the District of Columbia) at all times during such practice?</p>	<p>_____</p> <p>yes or no</p>

C.	<p>If such practice consisted exclusively of federal law, were you admitted to practice law in the federal jurisdiction in which your federal practice occurred?</p> <p>pag If not, please explain why you believe such practice was authorized.</p> <hr/> <hr/> <hr/>	<p>_____</p> <p>yes or no</p>
D.	<p>Have you ever been employed by a Texas law firm where your legal work consisted of other than exclusively federal law?</p> <p><b>If you answered “yes,” provide an affidavit and an affidavit from your supervising manager or managing partner that address the following areas:</b></p> <ol style="list-style-type: none"> <li>a. whether you performed any legal work in Texas; and if so,</li> <li>b. whether such practice, if any, was supervised by a licensed member of the Texas Bar who retained responsibility for the legal work and maintained a direct relationship with the client. Also, see <u>Texas Disciplinary Rules of Professional Conduct, Rule 5.05</u>, comments 4 and 5.</li> </ol>	<p>_____</p> <p>yes or no</p>

**EMPLOYMENT OUTSIDE OF LICENSED JURISDICTION:** (See Policy Statement, Paragraph II - B.)

VI.	<p><b>Have you ever practiced law, other than Pro Hac Vice, in any jurisdiction(s) (including foreign nations or another state or territory of the United States or the District of Columbia) without holding a valid, active license issued by each jurisdiction in which such practice occurs?</b></p> <ol style="list-style-type: none"> <li>a. If you answered “yes,” in order to have such employment considered for purposes of meeting any practice requirement of Rule XIII or XIV, <i>Rules Governing Admission to the Bar of Texas</i>, you must cause the jurisdiction in which the activity occurs to confirm in writing to the Board that it regards such practice as lawful.</li> <li>b. If it is demonstrated that written confirmation of lawful practice has been sought from the jurisdiction and cannot be obtained, alternate proof of lawfulness can be provided in the form of a written statement citing court rule, statute or other authority in the jurisdiction, demonstrating to the satisfaction of the Board that the jurisdiction does not regard such activity or practice as unlawful.</li> </ol>	<p>_____</p> <p>yes or no</p>
-----	--	-------------------------------

**PRO HAC VICE PRACTICE IN TEXAS:** (See Policy Statement, Paragraph III- H.)

VII.	<p><b>Have you ever been admitted Pro Hac Vice in a Texas state court?</b></p> <p>If you answered “yes,” provide the following:</p> <ol style="list-style-type: none"> <li>a. a copy of each motion seeking such admission and each order granting such admission.</li> </ol>	<p>_____</p> <p>yes or no</p>
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**DOCUMENTATION:**

VIII.	<p><b>Have you attached to this questionnaire all documents requested as a result of your answers?</b></p> <p>If not, please identify each item of requested documentation, which you have not attached, and provide a specific explanation of why you have not attached it.</p> <hr/> <hr/> <hr/> <hr/>	<hr/> <p>yes or no</p>
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STATE OF TEXAS

BEFORE ME, the undersigned Notary public on this day personally appeared \_\_\_\_\_,

***(Applicant's Full Name)***

who being by me duly sworn, on oath deposed and said that (s)he has read the preceding answers to the Eligibility Verification Questionnaire and Request for Documentation; that every statement contained in the answers is within his/her personal knowledge and is true and correct; that (s)he has attached and incorporated into his/her answers as an exhibit every applicable document requested in the Questionnaire or has explained why such document is not attached; and that every such exhibit is a true and correct copy of the document requested.

\_\_\_\_\_  
**Signature of Applicant**

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**(Seal)**

\_\_\_\_\_  
**Signature of Notary**

**My Commission expires:** \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

**AFFIDAVIT REGARDING LAWSUITS AND DISCIPLINE**

On this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, personally appeared before me, the undersigned authority, \_\_\_\_\_, who, after being duly sworn did state:

“I, \_\_\_\_\_, the undersigned applicant for certification as a Foreign Legal Consultant, do hereby affirm that I will immediately advise the Texas Board of Law Examiners, in writing, of any lawsuit brought against me which arises out of or is based upon any foreign legal consultant services rendered or offered to be rendered by me within the State of Texas.

“I further promise to immediately notify the Texas Board of Law Examiners, in writing, of any resignation or revocation of my admission to practice law in the country of \_\_\_\_\_, or of any censure, suspension or expulsion in respect to such admission.”

\_\_\_\_\_  
*Signature of Applicant*

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**(Seal)**

\_\_\_\_\_  
Signature of Notary

My Commission expires: \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

**DESIGNATION OF AGENT FOR SERVICE OF PROCESS**

On this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, personally appeared before me, the undersigned authority, \_\_\_\_\_, who, after being sworn did state upon oath;

“I, \_\_\_\_\_, the undersigned applicant for certification as a Foreign Legal Consultant, do hereby irrevocably designate:

Name: Susan Henricks or her successor as Executive Director  
Address: Board of Law Examiners  
P. O. Box 13486, Austin, TX 78711-3486  
Telephone: 512-463-1621

as my agent in the State of Texas upon whom process may be served, with like effect as if served personally upon me, in any action or proceeding hereafter brought against me and arising out of or based upon any legal services rendered or offered to be rendered by me within or to residents of the State of Texas whenever, after due diligence, service cannot be made upon me within the State of Texas at the address listed below or at such new address as I shall hereafter file with the Board of Law Examiners.

“My present actual residential address in the State of Texas is:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Signature of Applicant*

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**(Seal)**

\_\_\_\_\_  
Signature of Notary

My Commission expires: \_\_\_\_\_

