

FORM AFFIDAVIT AS TO APPLICANT'S COMPLETION OF THE PRO BONO SCHOLARS PROGRAM

INSTRUCTIONS

Applicants who successfully completed the Pro Bono Scholars Program must submit this form with their application for admission. The applicant must provide the information requested on page one of the form, and then have the form notarized. After the form is notarized, the attorney who supervised the applicant's pro bono work must then complete the Placement Supervisor Certification. Thereafter, the faculty member who supervised the applicant's academic component must complete the Faculty Supervisor Certification. The completed original form must then be included with the applicant's application for admission.

To Be Certified Under Oath By Applicant:

▼ NAME OF APPLICANT

▼ ADDRESS OF APPLICANT

▼ CITY / TOWN / VILLAGE

▼ STATE

▼ ZIP

▼ NAME OF LAW SCHOOL FROM WHICH YOU GRADUATED

▼ NAME OF LAW SCHOOL, LAW FIRM, CORPORATION OR ENTITY WHERE PRO BONO PLACEMENT WAS COMPLETED

▼ ADDRESS OF LAW SCHOOL, LAW FIRM, CORPORATION OR ENTITY WHERE PRO BONO PLACEMENT WAS COMPLETED

▼ CITY

▼ STATE

▼ ZIP

DATES OF SERVICE: From (mm/dd/yyyy): ____ / ____ / ____ To (mm/dd/yyyy): ____ / ____ / ____

TOTAL HOURS OF PRO BONO SERVICE COMPLETED: _____

TOTAL ACADEMIC COMPONENT HOURS COMPLETED: _____

TOTAL CREDITS EARNED IN PRO BONO SCHOLARS PROGRAM: _____

DESCRIPTION OF THE NATURE OF THE PRO BONO SERVICE COMPLETED (Include details regarding work performed, such as the type of client matters you handled, the substantive law involved, and the law-related activities in which you engaged).

STATE (Country) OF: _____)

COUNTY (City) OF: _____)

I (print name of applicant), _____, SWEAR (OR AFFIRM) that the foregoing information is true and accurate to the best of my knowledge.

Signature of Applicant: _____

Subscribed and sworn to or affirmed before me this _____ day of _____ in the year 20_____.

Notary Public* (Affix seal or stamp.)

* If this affidavit is sworn to outside the United States, its commonwealths, territories or possessions, and the attesting officer is not a notary public, attach a certificate of the attesting officer's authority to attest to or witness the signature of the affiant in the jurisdiction.

**To Be Completed By PLACEMENT SUPERVISOR:
SUPERVISOR CERTIFICATION**

I HEREBY CERTIFY (a) that I have read the foregoing Affidavit of Compliance and (b) that the applicant has accurately described the circumstances, timing and nature of the pro bono work described therein.

APPLICANT'S DUTIES WERE SATISFACTORILY PERFORMED: . . . No Yes

IF 'No', applicant's performance was *not satisfactory* in the following respects:

I HEREBY PROVIDE ANY OTHER FACTS within my knowledge, or of which I have information, which in my opinion have any bearing on applicant's qualifications and moral character or fitness to practice law, or which would be helpful to the Appellate Division or its Committees on Character and Fitness in determining applicant's character and fitness.

▼ ATTORNEY SIGNATURE	▼ PRINT ATTORNEY NAME	▼ DATE
▼ ATTORNEY TITLE		
▼ ATTORNEY EMPLOYER		
▼ JURISDICTION WHERE ADMITTED TO PRACTICE LAW		
▼ E-MAIL ADDRESS	▼ TELEPHONE	

**To Be Completed By FACULTY SUPERVISOR:
SUPERVISOR CERTIFICATION**

I HEREBY CERTIFY (a) that I have read the foregoing Affidavit of Compliance and (b) that the applicant has successfully completed the academic component of the Pro Bono Scholars Program, and (c) that the applicant has been awarded at least 12 credits for participation in the program.

▼ FACULTY MEMBER SIGNATURE	▼ PRINT FACULTY MEMBER NAME	▼ DATE
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▼ FACULTY MEMBER ADDRESS

▼ CITY	▼ STATE	▼ ZIP
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▼ E-MAIL ADDRESS	▼ TELEPHONE
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▼ COMMENTS *(if further explanation is necessary)*
