



APPLICATION TO REGISTER AS IN-HOUSE COUNSEL PURSUANT TO PART 522 OF THE RULES OF THE NEW YORK COURT OF APPEALS

(Please see the General Instructions for guidance on filing complete applications)

APPELLATE DIVISION (check one): 1ST DEPT. 2ND DEPT. 3RD DEPT. 4TH DEPT.

TO THE APPELLATE DIVISION OF THE SUPREME COURT OF THE STATE OF NEW YORK:

The undersigned hereby applies to register as an in-house counsel pursuant to Part 522 of the Rules of the Court of Appeals, and in support of such application submits the following sworn statement and the accompanying affidavits and other papers.

A. PERSONAL INFORMATION

1. a- State name in full:

FIRST ▼ MIDDLE ▼ LAST ▼ SUFFIX (JR., III) ▼

b- Date of birth: / / c- Social Security Number
(mm/dd/yyyy) (last four digits)

2. a- Office address:

NAME OF EMPLOYER ▼ EMPLOYER'S ADDRESS ▼
CITY / TOWN / VILLAGE ▼ STATE ▼ ZIP ▼ COUNTRY (if not USA) ▼
TELEPHONE ▼ E-MAIL (if any) ▼

3. a- Residential address:

STREET ADDRESS ▼
CITY / TOWN / VILLAGE ▼ STATE ▼ ZIP ▼ COUNTRY (IF NOT USA) ▼
TELEPHONE ▼ E-MAIL (if any)

B. ADMISSION INFORMATION

- Attach a Certificate of Good Standing from each state jurisdiction (or the District of Columbia) to which you are admitted.
- If you are not in good standing in any jurisdiction to which you were admitted, attach a statement explaining those circumstances.
- Attach additional sheets if you are supplying information for more than three state jurisdictions.

JURISDICTION NAME ▼ DATE OF ADMISSION ▼ BAR NO. (if applicable) ▼

Certificate of Admission and Good Standing provided? Yes No
Letter provided addressing substance and disposition of any charges filed against applicant? Yes No
Does the jurisdiction permit practice by in-house counsel? Yes No

JURISDICTION NAME ▼ DATE OF ADMISSION ▼ BAR NO. (if applicable) ▼

Certificate of Admission and Good Standing provided? Yes No
Letter provided addressing substance and disposition of any charges filed against applicant? Yes No
Does the jurisdiction permit practice by in-house counsel? Yes No

JURISDICTION NAME ▼ DATE OF ADMISSION ▼ BAR NO. (if applicable) ▼

Certificate of Admission and Good Standing provided? Yes No
Letter provided addressing substance and disposition of any charges filed against applicant? Yes No
Does the jurisdiction permit practice by in-house counsel? Yes No

AFFIDAVIT OF APPLICANT

STATE OF _____)
) ss.:
COUNTY (CITY) OF _____)

I, _____, swear (or affirm) that **(1)** I have provided the information required in the foregoing application fully, truthfully and accurately; **(2)** my answers are true of my own knowledge, unless stated as upon information and belief, and as to such answers, I believe them to be true; **(3)** I have read Part 522 of the Rules of the Court of Appeals (22 NYCRR §§ 522.1 et seq.); **(4)** I perform or will perform legal services in New York State solely and exclusively as provided in 22 NYCRR §522.4; and **(5)** I agree to be subject to the disciplinary authority of New York State and to comply with the New York Rules of Professional Conduct (22 NYCRR Part 1200.0) and the rules governing the conduct of attorneys in the _____ Judicial Department.

Signature _____

Sworn (or affirmed) before me this
_____ day of _____, in the year _____

Notary Public
(Affix seal or stamp.)

AFFIDAVIT /AFFIRMATION OF EMPLOYER

(To be signed by an officer, director, or general counsel of the applicant's employer)

STATE OF _____)
) ss.:
COUNTY OF _____)

I, _____, swear (or affirm) that **(1)** I am an officer director, or general counsel of _____ (“Employer”); **(2)** I have reviewed the information set forth in the foregoing application of _____ (“Applicant”), and believe that information to be true and correct; **(3)** I have read Part 522 of the Rules of the Court of Appeals (22 NYCRR §§522.1 et seq.); **(4)** the Applicant is (or, as of _____, will be) employed as an attorney for Employer in the State of New York; and **(5)** the nature of the Applicant’s employment by Employer conforms entirely with the requirements of Part 522 of the Rules of the Court of Appeals.

Signature _____

Title _____

Sworn (or affirmed) before me this
_____ day of _____, in the year _____

Notary Public
(Affix seal or stamp.)