**Did you:**

**1. Review your application for completeness?**

**2. Sign the acknowledgement before a notary public or commissioner of the superior court?**

**3. Attach all the required forms (your individual case may require you to file forms in addition to those listed below):**

**A) Form AHC1 (Application)**
**B) Form AHC4 (Affidavit re Rules of Professional Conduct)**
**C) Form AHC5 (Affidavit re Statewide Grievance Cmte)**
**D) Form AHC6 (Summary sheet - in duplicate)**
**E) Form AHC7 (Return address labels)**
**F) Form AHC8 (Two attorney affidavits)**
**G) Form AHC11 (Employer Certification)**
**H) Form AHC13A (List of employers)**
**I) Form AHC17 (Status sheet)?**

**4. Enclose a certified check or money order in the amount of $1,000.00 payable to: Connecticut Bar Examining Committee? (Note: Fees are not refundable!!)**

**Send your application, required supporting documents and fee to:**

**Connecticut Bar Examining Committee**
**AHC Application Department**
**100 Washington Street**
**Hartford, CT 06106-4411**

# Form AHC1

| AHC1 | Official Use Only | Connecticut Bar Examining Committee<br>Application for Registration<br>As Authorized House Counsel in Connecticut | **Authorized House Counsel Registration** |
|---|---|---|---|
| DF | | | |
| App # | | | |

A. Read the rules, regulations and instructions before completing this form.
B. Your answers must be typed and the application signed and notarized.
C. Be sure your name appears at the top of the Authorization and Release.
D. Pay the $1,000.00 fee by certified check or money order payable to "**Connecticut Bar Examining Committee**."

The undersigned applies for registration as authorized house counsel in Connecticut, and in support of such application submits the following sworn statement and attachments. **This application is a continuing application and I will notify the Bar Examining Committee of any changes in any information provided herein**. I have read the Rules of the Superior Court Regulating Admission to the Bar, the Regulations of the Connecticut Bar Examining Committee, and the Rules of Professional Conduct.

SECTION I. BIOGRAPHICAL INFORMATION

1. Full Name _____
(Last) (First) (Middle)

2. Name as you wish it to appear on your registration:
Full Name _____
(Last) (First) (Middle)

3. Place of Birth _____ Date of Birth _____
City/State/Country mm/dd/yyyy

4. Social Security Number [ ][ ][ ] [ ][ ] [ ][ ][ ][ ]

[This information is requested pursuant to 42 USC §666(a)(13)(A), Practice Book Secs. 2-4 and 2-15A, and Article VIII of the Regulations of the Bar Examining Committee. The information will be used to match various records with your file.]

5. Permanent/home address and telephone number (a street address is required; a P.O. box number is not acceptable):

| | | | | | |
|---|---|---|---|---|---|
| Street | | | | | |
| City | | | | | |
| State | | Zip Code | | Telephone | |

6. Business address and telephone number (a street address is required; a P.O. box number is not acceptable):

| | | | | | |
|---|---|---|---|---|---|
| Business Name | | | | | |
| Street | | | | | |
| City | | | | | |
| State | | Zip Code | | Telephone | |

7. Correspondence address and telephone number (if temporary, supply effective dates): From To

| | | | | | |
|---|---|---|---|---|---|
| Street | | | | | |
| City | | | | | |
| State | | Zip Code | | Telephone | |

Yes ☐ No ☐ 8. Have you ever made prior application for admission to the Connecticut bar (by examination or on motion without examination) or as authorized house counsel or foreign legal consultant? If so, give the dates of each such application.

| | | | | | |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |

Yes ☐ No ☐ 9. Have you ever been known by any other name including birth name (other than those listed in Questions 1 & 2 and other than a nickname such as "Bob" for "Robert")? List all such names and dates and places of use.

| | | | |
|---|---|---|---|
| Name | | Reason for use | |
| Dates of use | From | To | Places of use |

| | | | |
|---|---|---|---|
| Name | | Reason for use | |
| Dates of use | From | To | Places of use |

SECTION II. RESIDENCES

10. List in chronological order (from oldest to most recent) every permanent residence, for more than thirty days, for the last five years. Attach a Form AHC-2 with additional residences if necessary.

| | | | |
|---|---|---|---|
| From: | | To: | |
| Street | | | |
| City | | | |
| State | | Zip Code | |

| | | | |
|---|---|---|---|
| From: | | To: | |
| Street | | | |
| City | | | |
| State | | Zip Code | |

| | | | |
|---|---|---|---|
| From: | | To: | |
| Street | | | |
| City | | | |
| State | | Zip Code | |

| | | | |
|---|---|---|---|
| From: | | To: | |
| Street | | | |
| City | | | |
| State | | Zip Code | |

| | | | |
|---|---|---|---|
| From: | | To: | |
| Street | | | |
| City | | | |
| State | | Zip Code | |

## SECTION III. EDUCATION

Yes ☐ No ☐ 11. Have you ever been expelled, suspended, placed on probation or been the subject of or party to any disciplinary proceeding by any college, university or law school? If so, explain on Form AHC-2.

12. List in chronological order all law schools attended. If no degree was received, explain on Form AHC-2. The law school from which you earned your degree must submit Form AHC-9 directly to the Bar Examining Committee with an official, final transcript attached.

| | | | |
|---|---|---|---|
| School | | Degree | |
| City | | State | |
| Zip Code | From | To | |
| Explanation for no degree: | | | |

| | | | |
|---|---|---|---|
| School | | Degree | |
| City | | State | |
| Zip Code | From | To | |
| Explanation for no degree: | | | |

| | | | |
|---|---|---|---|
| School | | Degree | |
| City | | State | |
| Zip Code | From | To | |
| Explanation for no degree: | | | |

| | | | |
|---|---|---|---|
| School | | Degree | |
| City | | State | |
| Zip Code | From | To | |
| Explanation for no degree: | | | |

## SECTION IV. EMPLOYMENT AND LAW PRACTICE

13. Using Form AHC-13A, for the last five years, list in chronological order the name of each employer, complete current address (including zip code), position held, nature of the business, your immediate supervisor, and your reasons for leaving. Include any periods of self-employment and account for any periods of unemployment.

Yes ☐ No ☐ 14. Have you ever been discharged or terminated by an employer? If so, explain on Form AHC-2.

Yes ☐ No ☐ 15. Have you ever resigned or been requested to resign in lieu of impending or anticipated disciplinary action by an employer? If so, explain on Form AHC-2.

Yes ☐ No ☐ 16. Have you ever filed an application for admission to the bar and/or to sit for the bar examination in a jurisdiction other than Connecticut. This must also include (1) applications which you have filed to sit for the bar examination, (2) registration as a law student, (3) applications for reinstatement, (4) any application subsequently withdrawn, (5) applications for admission as a foreign legal consultant, and (6) applications as in-house or authorized house counsel. Submit a copy of each application filed within the last ten years. If a copy of an application is not available, you must submit a letter from the appropriate authority attesting to that fact.

| | | | | |
|---|---|---|---|---|
| Jurisdiction | | Date Filed | | |
| Type: ☐ Exam | ☐ Motion/reciprocity | ☐ Law Student Registration | ☐ Reinstatement | ☐ Other |
| Current status (e.g.: pending, pass, fail, withdrawn) | | | | |

| | | | | |
|---|---|---|---|---|
| Jurisdiction | | Date Filed | | |
| Type: ☐ Exam | ☐ Motion/reciprocity | ☐ Law Student Registration | ☐ Reinstatement | ☐ Other |
| Current status (e.g.: pending, pass, fail, withdrawn) | | | | |

| | | | | |
|---|---|---|---|---|
| Jurisdiction | | Date Filed | | |
| Type: ☐ Exam | ☐ Motion/reciprocity | ☐ Law Student Registration | ☐ Reinstatement | ☐ Other |
| Current status (e.g.: pending, pass, fail, withdrawn) | | | | |

Yes ☐ No ☐ 17. Are you or have you ever been a member of the bar of another jurisdiction? If so, submit a certificate of good standing for each jurisdiction. If you are not in good standing, explain on Form AHC-2.

| | | | |
|---|---|---|---|
| Jurisdiction | | | |
| Date of admission | | License Number | |
| Good standing | Yes ☐ No ☐ | Explanation | |

| | | | |
|---|---|---|---|
| Jurisdiction | | | |
| Date of admission | | License Number | |
| Good standing | Yes ☐ No ☐ | Explanation | |

| | | | |
|---|---|---|---|
| Jurisdiction | | | |
| Date of admission | | License Number | |
| Good standing | Yes ☐ No ☐ | Explanation | |

Yes ☐ No ☐ 18. Have you ever been reprimanded, censured, suspended, disbarred or otherwise disciplined, or are there any charges or complaints pending against you as an attorney, or have you ever been accused of the unauthorized practice of law, or have you ever resigned or been requested to resign from the bar in lieu of impending or anticipated disciplinary action? If so, explain on Form AHC-2.

NA ☐

Yes ☐ No ☐ 19. Have you been entitled to practice law in each of the jurisdictions specified in Question 17 above and before each court continuously from the date you first became entitled until the date hereof? If not, state the dates during which you have not been so entitled, the nature of the disqualification, and the name and address of the person or authority in possession of the record thereof.

NA ☐

| | | | | |
|---|---|---|---|---|
| Jurisdiction | | Dates of disqualification | From | To |
| Nature of disqualification | | | | |
| Name of recordholder | | | | |
| Address of recordholder | | | | |

## SECTION V. MILITARY SERVICE

**Selective Service Registration.** You can obtain information on the registration requirements and obtain your registration number at http://www.sss.gov. In brief, men born from March 29, 1957 to December 31, 1959 were never required to register because the registration program was not in operation at the time they turned 18. The requirement to register was reinstated in 1980 and applies to all men born on or after January 1, 1960.

Yes ☐ No ☐ 20. Have you registered under the Selective Service Act?
If Yes, list registration number _____
If No, state reason ☐ Female Other _____

## SECTION VI. GENERAL QUESTIONS

Yes ☐ No ☐ 21. Have you ever had any license or permit, other than as an attorney at law, the procurement of which required proof of good character, suspended or revoked because of unprofessional conduct? If so, explain on Form AHC-2 and include the type of license or permit, the date suspended or revoked and the current status of the license or permit.

Yes ☐ No ☐ NA ☐ 22. Have you ever been refused a bond or has anyone ever sought to recover on or cancel such bond? If so, explain on Form AHC-2.

Question 23 addresses ongoing mental health and chemical or psychological dependency matters. The purpose of this question is to determine the current fitness of an applicant to be authorized house counsel. Each applicant is considered on an individual basis. The mere fact of treatment for mental health problems or chemical or psychological dependency is not, in and of itself, a basis on which an applicant will ordinarily be denied such authorization. As with applications for admission to the bar, the Connecticut Bar Examining Committee anticipates that it will regularly recommend authorization of individuals who have demonstrated personal responsibility and maturity in dealing with mental health and chemical or psychological dependency issues. The Committee encourages applicants who may benefit from treatment to seek it. As indicated in the Rules, all proceedings conducted pursuant to the Rules and Regulations are confidential.

On occasion authorization may be denied when an applicant's ability to function is impaired in a manner relevant to providing legal services at the time that the decision is made, or when an applicant demonstrates a lack of candor by his or her responses. Furthermore, each applicant is responsible for demonstrating that he or she possesses the qualifications necessary to provide legal services to an organization as authorized house counsel. Your response may include information as to why, in your opinion or that of your treatment provider, your condition will not affect your ability to provide such services in a competent and professional manner.

The Connecticut Bar Examining Committee does not, by its question, seek information that is characterized as situational counseling, such as stress counseling, domestic counseling, and grief counseling. Generally, the Committee does not view these types of counseling as germane to the issue of whether an applicant is qualified to provide legal services as authorized house counsel.

If you answer "YES" to Question 23, complete Forms AHC23A & AHC23B. Make as many copies of the forms as you need to describe the events.

Yes ☐ No ☐ 23. 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) which in any way affects your ability to provide legal services to an organization in a competent and professional manner? "Currently" means recently enough so that the condition could reasonably have an impact on your ability to function as authorized house counsel.

SECTION VII. CIVIL PROCEEDINGS
Questions 24- 26 are limited to the last five years

| Yes | No | | |
|---|---|---|---|
| ☐ | ☐ | 24. | Are you in arrears or default in the performance of any court ordered duty or obligation? If so, submit a copy of the order and on Form AHC-2 an explanation of the steps you have taken to remedy the arrearage or default. |
| ☐ | ☐ | 25. | Are you presently, or have you ever been, in arrears or default in the performance of any court approved agreement, judgment or court order concerning child support? If so, supply all documentation pertaining thereto and a statement on Form AHC-2 outlining the steps you are presently taking to remedy such arrearage or default. |
| ☐ | ☐ | 26. | Have you ever been a defendant in any civil proceeding involving fraud, misrepresentation or other improper conduct in which judgment was entered against you or in which you were party to a settlement? If so, provide the information requested below and submit a copy of the complaint, answer and judgment or settlement agreement, as appropriate. |

**EXAMPLE**

| | | |
|---|---|---|
| A. | Title of case | Jones v. Smith |
| B. | Name of forum | Hartford Superior Court |
| C. | Docket number | CV-02-001 |
| D. | Date filed | 01 Jan 02 |
| E. | Nature of case | Personal injury |
| F. | Your position in case | Defendant |
| G. | Your attorney | Jane Doe |
| H. | Opposing attorney | Elizabeth Green |
| I. | Current status or disposition | Verdict for plaintiff |

**PHOTOCOPY AS NECESSARY**

| | | |
|---|---|---|
| A. | Title of case | |
| B. | Name of forum | |
| C. | Docket number | |
| D. | Date filed | |
| E. | Nature of case | |
| F. | Your position in case | |
| G. | Your attorney | |
| H. | Opposing attorney | |
| I. | Current status or disposition | |

| | | |
|---|---|---|
| A. | Title of case | |
| B. | Name of forum | |
| C. | Docket number | |
| D. | Date filed | |
| E. | Nature of case | |
| F. | Your position in case | |
| G. | Your attorney | |
| H. | Opposing attorney | |
| I. | Current status or disposition | |

| Yes | No | | |
|---|---|---|---|
| ☐ | ☐ | 27. | Except as provided in Question 26 above, have you ever been a party to any competency, commitment, guardianship or probate proceeding, or a proceeding involving a civil restraining order, in which judgment was entered against you or in which you were party to a settlement? |

| | | |
|---|---|---|
| A. | Title of case | |
| B. | Name of forum | |
| C. | Docket number | |
| D. | Date filed | |
| E. | Nature of case | |
| F. | Your position in case | |
| G. | Your attorney | |
| H. | Opposing attorney | |
| I. | Current status or disposition | |

| | | |
|---|---|---|
| A. | Title of case | |
| B. | Name of forum | |
| C. | Docket number | |
| D. | Date filed | |
| E. | Nature of case | |
| F. | Your position in case | |
| G. | Your attorney | |
| H. | Opposing attorney | |
| I. | Current status or disposition | |

SECTION VIII. CRIMINAL AND MOTOR VEHICLE PROCEEDINGS

| Yes | No | | |
|---|---|---|---|
| ☐ | ☐ | 28. | Have you ever been convicted of a felony? If so, submit a copy of the arrest report and all other documents relating to each conviction. Submit an affidavit reciting in detail the facts and circumstances of each reported event. |

**SAMPLE**

| | | |
|---|---|---|
| A. | Title of case | State v. Smith |
| B. | Name of forum | Hartford Superior Court |
| C. | Docket number | CR-02-001 |
| D. | Date of conviction/disposition | 01 Jan 02 |
| E. | Conviction offense | Larceny 3 |
| F. | Initial charge (if different) | Grand theft auto |

| | | |
|---|---|---|
| A. | Title of case | |
| B. | Name of forum | |
| C. | Docket number | |
| D. | Date of conviction/disposition | |
| E. | Conviction offense | |
| F. | Initial charge (if different) | |

| Yes | No | | |
|---|---|---|---|
| ☐ | ☐ | 29. | Are there any criminal charges pending against you? If so, submit a copy of the arrest report and all other documents related to each pending charge. Submit an affidavit reciting in detail the facts and circumstances related to each pending charge. |

**SAMPLE**

| | | |
|---|---|---|
| A. | Title of case | State v. Smith |
| B. | Name of forum | Hartford Superior Court |
| C. | Docket number | CR-02-001 |
| D. | Date of arrest | 01 Jan 02 |
| E. | Date of trial | 01 Feb 02 |
| F. | Offense charged | Grand theft auto |

| | | |
|---|---|---|
| A. | Title of case | |
| B. | Name of forum | |
| C. | Docket number | |
| D. | Date of arrest | |
| E. | Date of trial | |
| F. | Offense charged | |

| Yes | No | | |
|---|---|---|---|
| ☐ | ☐ | 30. | Within the last year, have you been charged with reckless driving , evading responsibility, driving under the influence (DUI) or driving while intoxicated (DWI)? On Form AHC-2 submit a narrative of the events related to each charge. |

**SAMPLE**

| | | |
|---|---|---|
| A. | Jurisdiction | Connecticut |
| B. | Date of charge | 01 Jan 02 |
| C. | Docket number (if any) | n/a |
| D. | Initial charge | DWI |
| E. | Current status or disposition | reckless driving |

| | | |
|---|---|---|
| A. | Jurisdiction | |
| B. | Date of charge | |
| C. | Docket number (if any) | |
| D. | Initial charge | |
| E. | Current status or disposition | |

| | | |
|---|---|---|
| A. | Jurisdiction | |
| B. | Date of charge | |
| C. | Docket number (if any) | |
| D. | Initial charge | |
| E. | Current status or disposition | |

| | | |
|---|---|---|
| A. | Jurisdiction | |
| B. | Date of charge | |
| C. | Docket number (if any) | |
| D. | Initial charge | |
| E. | Current status or disposition | |

None ☐ 31. List every jurisdiction in which you currently hold a motor vehicle driver's license or operator's permit or in which your driving privileges have ever been suspended or revoked (regardless of whether you hold a current license or permit in that jurisdiction). On Form AHC2, provide a narrative for each suspension or revocation. Submit a **certified** driving record* from the Department of Motor Vehicles from each listed jurisdiction. (* or a letter of clearance or no record / no history letter, as may be applicable)

**SAMPLE**

| | | |
|---|---|---|
| A. | Jurisdiction | Connecticut |
| B. | Date held | 01 Jan 80 – present |
| C. | Type of license/permit | passenger car and motorcycle license |
| D. | Current status | Active |
| E. | Ever revoked/suspended | Yes x No ☐ Suspended from 1/1/2002 To 3/1/2002 |

| | | |
|---|---|---|
| A. | Jurisdiction | |
| B. | Date held | From _____ To _____ |
| C. | Type of license/permit | |
| D. | Current status | |
| E. | Ever revoked/suspended | Yes ☐ No ☐ Suspended from To |

| | | |
|---|---|---|
| A. | Jurisdiction | |
| B. | Date held | From _____ To _____ |
| C. | Type of license/permit | |
| D. | Current status | |
| E. | Ever revoked/suspended | Yes ☐ No ☐ Suspended from To |

| | | |
|---|---|---|
| A. | Jurisdiction | |
| B. | Date held | From _____ To _____ |
| C. | Type of license/permit | |
| D. | Current status | |
| E. | Ever revoked/suspended | Yes ☐ No ☐ Suspended from To |

SECTION IX. AUTHORIZATION AND RELEASE

| | |
|---|---|
| Full Name | |
| Social Security Number | |
| Date of Birth | |

As part of my application for registration as authorized house counsel in the state of Connecticut, I consent to have an investigation made as to my moral character, professional reputation and fitness to provide legal services to an organization as authorized house counsel. I agree to provide any further information that may be required in reference to my past record. I further agree to execute such further releases as may be requested by the Connecticut Bar Examining Committee. I understand that the contents of my character report are confidential and that I will not be entitled to receive a copy of the report, including but not limited to, character affidavits submitted in support of this application, or to know its contents.

I hereby authorize and request every person, firm company, corporation, government agency, law enforcement agency, court, association or institution having control of any documents, records, or other information pertaining to me, to furnish to the Connecticut Bar Examining Committee any such information, including documents, records, bar association files regarding charges or complaints

filed against me, including any complaints erased by law, whether formal or informal, pending or closed, or any other pertinent data; and to permit the Connecticut Bar Examining Committee or any of its agents or representatives to inspect and make copies of such documents, records, or other information. The records, however, will not include any information with respect to a juvenile offense.

I authorize the National Personnel Records Center in St. Louis, MO or other custodian of my military record to release to the Connecticut Bar Examining Committee information or photocopies from my military personnel and related medical records including a copy of my Report of Separation DD214.

I hereby release, discharge and exonerate the Connecticut Bar Examining Committee, its authorized representatives and any person furnishing information authorized by this release from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records and other information or the investigation made by the Connecticut Bar Examining Committee.

SECTION X. ACKNOWLEDGEMENT OF APPLICATION and AUTHORIZATION AND RELEASE

| | | | | | | |
|---|---|---|---|---|---|---|
| Dated at | City | | State | | on | |

_____
(Signature of Applicant)

| | |
|---|---|
| State of | |
| | |
| County of | |

On this the _____ day of _____, 200 before me, _____
(day) (month) (notary public/commissioner of the superior court)

personally appeared _____, known to me (or satisfactorily proven) to be the person
(applicant)
whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained and that his/her responses are true to the best of his/her knowledge.

In witness whereof I hereunto set my hand.

_____
(notary public/commissioner of the superior court)



Reset