

**ATTORNEY REGISTRATION
CHANGE OF INFORMATION**

JD-GC-10 Rev. 1-12
P.B. § 2-27

**STATE OF CONNECTICUT
JUDICIAL BRANCH**

STATEWIDE GRIEVANCE COMMITTEE

287 Main Street, 2nd Floor, Suite 2
East Hartford, CT 06118-1885
www.jud.ct.gov/sgc

FOR QUESTIONS, EMAIL
Attorney.registration@jud.ct.gov
Or call (860) 568-5157

Read the accompanying instructions before preparing this document. Questions about completing this form may be e-mailed to Attorney.Registration@jud.ct.gov OR call (860) 568-5157

Enter All Previously Registered Public Information Here						Enter New or Corrected Public Information Here					
1. Name of Attorney						1. Name of Attorney (Include proof of name change)					
Firm or business name (Primary law or business office)						Firm or business name (Primary law or business office)					
Office address (Number and street)				Post Office box		Office address (Number and street)				Post Office box	
City			State	Zip code		City			State	Zip code	
Judicial District(s) of law office(s) (For Attorney with Connecticut addresses only)						Judicial District(s) of law office(s) (For Attorney with Connecticut addresses only)					
Business telephone (Leave telephone number blank if at least one of the following boxes has been checked)						Business telephone (Leave telephone number blank if at least one of the following boxes has been checked)					
<input type="checkbox"/> I do not maintain a business telephone		<input type="checkbox"/> I do not work in the U.S. or its territories				<input type="checkbox"/> I do not maintain a business telephone		<input type="checkbox"/> I do not work in the U.S. or its territories			
Juris number						Juris number					
2. The following is a list of all other jurisdictions (States and District of Columbia only) where I have ever been admitted to practice as a lawyer:						2. The following is a list of all other jurisdictions (States and District of Columbia only) where I have ever been admitted to practice as a lawyer:					
<input type="checkbox"/> None	Year	State	Year	State	Year	State	<input type="checkbox"/> None	Year	State	Year	State
3. I engage in the private practice of law in the State of Connecticut.						3. I engage in the private practice of law in the State of Connecticut.					
<input type="checkbox"/> Yes		<input type="checkbox"/> Not at all		<input type="checkbox"/> Retired		<input type="checkbox"/> Yes		<input type="checkbox"/> Not at all		<input type="checkbox"/> Retired	
<input type="checkbox"/> Pro Hac Vice (Stop here and sign at bottom)						<input type="checkbox"/> Pro Hac Vice (Stop here and sign at bottom)					
4. I, individually or through the firm with which I am associated, participate in IOLTA (Interest on Lawyer's Trust Accounts) pursuant to Rule 1.15 of the Rules of Professional Conduct:						4. I, individually or through the firm with which I am associated, participate in IOLTA (Interest on Lawyer's Trust Accounts) pursuant to Rule 1.15 of the Rules of Professional Conduct:					
<input type="checkbox"/> Yes		<input type="checkbox"/> No				<input type="checkbox"/> Yes		<input type="checkbox"/> No			
5. I do not maintain a fiduciary account. <input type="checkbox"/> ("X" here)						5. I do not maintain a fiduciary account. <input type="checkbox"/> ("X" here)					
Enter All Previously Registered Non-Public Information Here						Enter New or Corrected Non-Public Information Here					
6. Home address (Number, street, city, state, zip code)						6. Home address (Number, street, city, state, zip code)					
Office e-mail address						Office e-mail address					
Date of birth (Month, day, year)						Date of birth (Month, day, year)					

Certification

I certify that the information provided is true. If any statements are willfully false, I realize I am subject to discipline by the Superior Court.

Attorney's signature

Date signed

Retain a copy for your records and mail original to:

STATEWIDE GRIEVANCE COMMITTEE, ATTORNEY REGISTRATION
2nd Floor, Suite Two
287 Main Street
East Hartford, CT 06118-1885.

1. Name of Attorney	Juris number
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7. I, individually or through the firm with which I am associated, maintain the following fiduciary account(s). *(If no account is maintained leave blank; Associates and Of Counsel list firm information.)*

Enter All Previously Registered Information Here		Enter New or Corrected Information Here	
Account number:		Account number:	New <input type="checkbox"/> Corrected <input type="checkbox"/>
Financial Institution:		Financial Institution:	
City:		City:	
Account number:		Account number:	New <input type="checkbox"/> Corrected <input type="checkbox"/>
Financial Institution:		Financial Institution:	
City:		City:	
Account number:		Account number:	New <input type="checkbox"/> Corrected <input type="checkbox"/>
Financial Institution:		Financial Institution:	
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Account number:		Account number:	New <input type="checkbox"/> Corrected <input type="checkbox"/>
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Account number:		Account number:	New <input type="checkbox"/> Corrected <input type="checkbox"/>
Financial Institution:		Financial Institution:	
City:		City:	

Instructions for Completing the Attorney Registration Forms (JD-GC-9 and JD-GC-10)

Note: Except for pro hac vice attorneys and attorneys who have been granted an exclusion from electronic services requirements, attorneys and authorized house counsel must enroll in judicial branch e-services and register electronically at www.jud.ct.gov. Excluded attorneys and pro hac vice attorneys must submit the enclosed paper form.

Public Information

Question 1 (Name, Address, Location of Connecticut Offices and Business Telephone)

If your business address or home address is different from what is listed on the form, **print clearly** or type the correct information on the **right side of the form**.

If you are currently unemployed or do not have a business address, write **none** in the business address section on the **right side of the form**.

NOTE: If you register your home address in the office address section of the form it will be considered public information.

In the box labeled "Judicial District(s) of Law Office(s)" enter the abbreviation of the judicial district(s) in which you or your firm maintain your law office(s). See abbreviations below.

If your registration form indicates that your Judicial District Law Office is in HNB (i.e. Hartford-New Britain), please indicate in the shaded portion of the right side of the form whether your office is in the Hartford Judicial District (HHD), the New Britain Judicial District (HHB) or both, together with any other judicial districts in which you or your firm maintains an office. Abbreviations for other Judicial Districts are as follows:

Ansonia/Milford	-AM	New Britain	-HHB	New London	-NL
Danbury	-DAN	Litchfield	-L	Stamford/Norwalk	-SN
Fairfield	-F	Middlesex	-M	Tolland	-T
Hartford	-HHD	New Haven	-NH	Waterbury	-WB
				Windham	-WIN

The business telephone question is new for 2012. Provide your business telephone number with area code. If you do not maintain a business telephone or work outside of the United States and its territories, check the appropriate box.

Question 2 (Admitted In Other Jurisdictions?)

If you have been admitted to practice in other jurisdictions, write in the year and abbreviation of the state on the **right side of the form**.

Do Not List Federal Court Admissions or Admission to Foreign Countries.

Our computer can only accept admission to other jurisdictions for **3** states. If you are admitted to more than 3 other states, list additional admission information on a separate piece of paper.

You do not have to put in your admission to Connecticut. We already have that information.

Question 3 (Engaged In The Private Practice Of Law In Connecticut?)

Except as noted below, if you practice law *in any capacity* in Connecticut, whether it is for a large law firm or a private corporation, including Authorized House Counsel, the answer to this question should be **YES**. Associates, Of Counsel, employees of law departments for private or public corporations, practicing law in **any** capacity at all requires that you answer **YES** to this question.

The exceptions to this question are State of Connecticut and other government employees. If you are a federal, state, or municipal employee exclusively, the answer to this question is **NO**. To answer "**RETIRED**" you must have complied with Practice Book § 2-55, which provides:

Sec. 2-55. Retirement of Attorney

Written notice of retirement from the practice of law, pursuant to the provisions of General Statutes § 51-81b, shall not constitute removal from the bar or the roll of attorneys, but it shall be noted on the roll of attorneys kept by the clerk in Hartford county who shall notify the statewide bar counsel of such retirement. The notice shall include the attorney's juris number and be filed in triplicate with such clerk. Upon the filing of such notice, the attorney shall no longer be eligible to practice law as an attorney admitted in the state of Connecticut. Retirement may be revoked at any time upon written notice to the clerk for Hartford county and the statewide bar counsel. Disciplinary proceedings against an attorney shall not be stayed or terminated on account of the attorney's retirement from the practice of law.

Connecticut Admitted Attorneys: If You Answer "Yes" in Section 3, you must complete the "Judicial District(s) Of Law Offices" box in Section 1 and complete Sections 4 and 5.

Authorized House Counsel: You must complete the "Judicial District(s) of Law Offices box in Section 1. You **Do Not** need to complete Sections 4 and 5.

Pro Hac Vice Attorneys: If you answer "Pro Hac Vice" in Section 3 you **Do Not** need to complete Sections 4 and 5.

Question 4 (Participate In IOLTA?)

If you **or the firm that you work for** participates in the IOLTA (Interest on Lawyers' Trust Accounts) program, answer **YES** to this question. Authorized House Counsel should check **NO**. If you answered "Pro Hac Vice" in response to Section 3, you may skip this section.

Question 5 (Maintain Trust/Fiduciary Account(s)?)

This is to be completed **ONLY** if you have answered “yes” section 3. Authorized House Counsel and Pro Hac Vice attorneys do not have to provide this information and may proceed to the bottom of the form.

Non-Public Information

Question 6 (Home address, Office e-mail, Date of birth)

Provide all information. Note: if you have not listed a business address above, you **MUST** provide a home address here. This information is not public.

The e-mail address area is new for 2012. The e-mail address you provide will not be public information. If you do not maintain an office e-mail address, provide an e-mail address for contact information.

Question 7 (List of Fiduciary Accounts)

If you or the firm that you work for maintain one or more fiduciary accounts, you must submit the information for any account in which the funds of more than **one Connecticut client** are kept. See Practice Book §§ 2-27(d), 2-28(c). Provide the information on the continuation page(s) of this form.

If you no longer maintain an account listed on your form, check the box marked “delete.”

If you are entering information about an account that does not appear on the form, enter it on the right side of the form and check the box with the heading “new” above it. The space to the left of this information should remain blank.

If information about an account printed on the form has changed (e.g., the name of the financial institution), enter the correct information on the right side of the form and check the box with the heading “corrected” above it.

Associates and of counsel, list your firm's account information.

If no trust funds are maintained, leave blank.

Certification (Sign and date)

Do Not Forget Your Signature! Your form will be returned to you if it is not signed, you will be deemed not to have complied with the registration requirement and, consequently, you will be considered to be **NOT** in good standing in the Connecticut bar (*see Practice Book § 2-65*).

Folding Instructions

With page one of the form face up, fold the form in half along the fold line printed on the form. Next, fold the form in half again along the fold line printed on the continuation page. **The folded form will be narrower than the return envelope.**

Questions?

E-mail us at Attorney.Registration@jud.ct.gov or call us at (860) 568-5157.