

**DISTRICT COURT OF THE VIRGIN ISLANDS**

**APPLICATION FOR RENEWAL OF BAR MEMBERSHIP**

*Please fill in all blanks and answer all questions. If a particular question does not apply to you, write "none" or "N/A". Applications which are not properly completed will be returned.*

**NAME**

\_\_\_\_\_

**ADDRESS**

\_\_\_\_\_

**MAIN FIRM PHONE NO.**

\_\_\_\_\_

**FAX NO.**

\_\_\_\_\_

**E-MAIL ADDRESS**

\_\_\_\_\_

**ADMISSION DATE:** \_\_\_\_\_

**A. CHARACTER & FITNESS**

*Please answer all questions. If you answer "yes" to any of these questions, you are required to submit a statement under the penalties of perjury which includes the relevant facts, court, charge, date, whether the occurrence was disclosed to the highest court of the state(s) in which you are admitted, disposition, whether the occurrence was an isolated incident, and any other facts you deem relevant.*

1. Are there any disciplinary proceedings pending against you?

YES  NO

2. Have you ever been denied admission to practice, disbarred, suspended from practice, or disciplined by any court or bar authority?

YES  NO

3. If you have been suspended or disbarred from the practice of law by any court or bar authority, have you been reinstated?

YES  NO  N/A

4. Have you ever resigned from the practice of law in any court?

YES  NO

5. Excluding traffic violations punishable by fine only, have you ever been convicted of, or entered a plea of no contest to, any crime or are any criminal charges pending against you?

YES  NO

6. Have you ever been held in contempt of court?

YES  NO

**B. PRO BONO ASSISTANCE OF PRO SE LITIGANTS**

*The Court will not appoint members of the Bar to civil cases. To the extent that you wish to consider representing indigent parties on a pro bono basis, please answer questions 1-3 so that your skills and preferences may be taken into account.*

1. I prefer to assist in the following types of cases:

Employment Discrimination

Constitutional Claims

Bankruptcy

Personal Injury

Other: \_\_\_\_\_

2. My primary area of practice is: \_\_\_\_\_

3. If you are employed by a government agency, provide the name: \_\_\_\_\_

\_\_\_\_\_

**C. CRIMINAL APPOINTMENTS**

*The Court appoints members of the Bar to criminal cases. Please answer the following question so that your skills and preferences may be taken into account if you are appointed in a criminal matter.*

I prefer to be appointed in the following types of cases:

White Collar

Immigration

Narcotics

Firearms

Violent Crime

Other: \_\_\_\_\_

**D. APPLICANT'S CERTIFICATION**

1. I have been admitted to practice law in the following jurisdictions (states, territories, or the District of Columbia):

COURT	DATE OF ADMISSION/ BAR NUMBER	ACTIVE MEMBER $\checkmark$
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. Unless otherwise indicated in Section A, I am a member in good standing of the bars of each of the jurisdictions listed above.

3. I am familiar with the Rules of Professional Conduct, the Federal Rules of Civil and Criminal Procedure, the Federal Rules of Evidence, and the Local Rules of the District Court of the Virgin Islands.

4. My principal law office is located in \_\_\_\_\_.

5. I am a member of the bar of the following United States Courts:

U.S. COURT	DATE OF ADMISSION/BAR NUMBER	ACTIVE MEMBER $\checkmark$
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

6. I understand that it is my responsibility to notify the Attorney Admission Coordinator of any change in my address.

7. I understand that I will be required to renew my membership in the Bar of this Court by February 4 of each calendar year, unless otherwise directed by the Court.
8. I understand that I submit myself to the jurisdiction of this Court for any disciplinary action to which I may be subject.

**I hereby certify under the penalties of perjury that the foregoing statements and answers are true and correct.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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For Court Use Only

Fee:

Check

Cash

Amount: \_\_\_\_\_

Staff Notes

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Granted/Denied

\_\_\_\_\_  
Judicial Officer

**Dated:**