



Connecticut Bar Examining Committee
100 Washington Street
Hartford, CT 06106-4411

**AFFIDAVIT OF FOREIGN ATTORNEY
OR JUDGE**

IN RE THE APPLICATION OF _____
FOR ADMISSION AS A FOREIGN LEGAL CONSULTANT.

1. Affiant's Name _____

2. Affiant's address and telephone number (indicate whether home or business):

Firm: _____
Street: _____
City: _____ State _____ Zip _____
Phone: H ☐ W ☐ _____

3. Date of admission to the Connecticut bar: _____

4. How long have you known the applicant? _____

5. Are you related to the applicant? _____ If so, in what way? _____

6. What opportunities have you had to form an opinion of the applicant's professional and personal character and fitness to become a Foreign Legal Consultant in Connecticut? Be specific.

7. Would you recommend the applicant for a position of trust? _____ If not, please tell us why.

8. In your opinion, does the applicant possess the character and fitness to become a Foreign Legal Consultant in Connecticut? _____ If not, please tell us why.

Form FLC14

9. To your knowledge:

YES NO

- ☐ ☐ Has the applicant been arrested within the past five years or ever been convicted of a crime
- ☐ ☐ Has the applicant ever been accused of a violation of trust
- ☐ ☐ Has the applicant ever been dropped, suspended from, disciplined or placed on probation by an educational institution
- ☐ ☐ Has the applicant ever been a party to a law suit (including bankruptcy)
- ☐ ☐ Has the applicant ever been denied admission to the bar of any jurisdiction
- ☐ ☐ Has the applicant ever been delinquent in any financial obligation
- ☐ ☐ Does the applicant have any condition or impairment which in any way currently affects the applicant's ability to practice law
- ☐ ☐ Has the applicant ever exhibited any pattern of behavior or conduct that raises significant concerns about the applicant's character and fitness to practice law

If you answered "yes" to any of these questions, please tell us about it. You may also use this space for any additional comments you wish to make about the applicant. _____

10. To your knowledge is the applicant currently suffering from a disability which would impair the applicant's ability to practice law? _____ If so, explain. _____

11. What opportunities have you had to know the nature and duration of the applicant's practice of law?

12. Has the applicant been lawfully engaged in the practice of law as his/her principal means of livelihood for at least five of the last seven years? Please describe that practice.

(Signature)

Sworn to before me this _____
day of _____, 20____.

(Notary Public)