

**SUPREME COURT OF ARKANSAS  
Office of Professional Programs  
State Board of Law Examiners  
Arkansas Continuing Legal Education Board  
501 Woodlane St, Ste 303N  
Little Rock, Arkansas 72201  
Tel. (501) 374-1855  
Fax. (501) 374-1853**

**ADMISSION ON MOTION  
COVER MEMORANDUM**

**From: Nancie Givens, Executive Director  
Arkansas State Board of Law Examiners**

The admission on motion application follows this cover memorandum, which I offer as a source of additional guidance and information to applicants seeking admission on motion to the Bar of Arkansas.

Understand that processing your application and completing the admission on motion process will likely take at least four months, perhaps more, depending upon the circumstances of each application. Be aware that an initial review will be done upon receipt of your application and filing fee, which generally takes a few weeks. After the initial review, you will receive acknowledgment of receipt of your application with further instructions, including fingerprinting. We offer no expedited service.

Remember, the burden is on the applicant to establish that he or she meets the “active practice of law requirements.” When completing the response to the question about previous employment, you should elaborate upon the nexus between your employment and one of the various categories that qualify as “active practice of law.”

Finally, for those periods during which you were engaged in the private practice of law either as a solo practitioner or as a member of a law firm, you must complete the certificate of practice in this application. The Certificate of Practice requires the signature of a Judge **and** two attorneys.

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**ADMISSION ON MOTION**

**INSTRUCTIONS TO APPLICANTS FOR PREPARING CHARACTER  
QUESTIONNAIRE AND ATTACHMENTS**

**FIRST: THE CHARACTER QUESTIONNAIRE**

1. Mail or deliver the original completed Admission on Motion to:

**State Board of Law Examiners  
Rockefeller Building  
501 Woodlane St, Ste 303N  
Little Rock, AR 72201**

2. The answers must be typed or handwritten so that the answers may be easily read.
3. The answers must be full and complete; and,
4. The application's format cannot be altered in any manner, including printing on both sides of the pages.

**SECOND: THE FEE**

1. APPLICATION FEE - A single MONEY ORDER OR CASHIER'S CHECK payable to the STATE BOARD OF LAW EXAMINERS for \$1500.00. No cash, personal checks, or business checks will be accepted.
2. The fee is nonrefundable. However, if it develops you are not eligible for admission on motion, you may take the next Bar Exam being administered in Arkansas, at no cost, for which the application deadline has not passed.

**THIRD: YOU ARE RESPONSIBLE FOR SEEING THAT YOUR LAW SCHOOL CERTIFIES YOU TO THE BOARD AS A GRADUATE.**

You must utilize the form which appears in the application. The certification form must be original and attached to your application. If the Law School is only emailing such documents, they must be emailed directly by the Law School to the Board at [BarExamApplicants@arcourts.gov](mailto:BarExamApplicants@arcourts.gov). Make note that transcripts will not suffice.

You must have graduated from a law school that the American Bar Association accredited at the time of your graduation.

**FOURTH:** It is your responsibility to provide sufficient evidence to establish that you meet the requirements for admission on motion pursuant to *Rule XVI of the Rules Governing Admission to the Bar of Arkansas*. In addition to your completed questionnaire and attachments, the Board, in its discretion, may require further evidence relating to your eligibility for admission on motion.

**CHARACTER QUESTIONNAIRE FOR ADMISSION TO THE  
BAR OF ARKANSAS BY MOTION**

NOTICE TO APPLICANT: Complete, sign, and notarize this Character Questionnaire for Admission on Motion. All statements are to be based on your knowledge unless the statement is expressly qualified to the source of your information. If the space for an answer is insufficient, you must complete your answer on a separate attached sheet.

Complete an answer to each question.

1. (a) Full Name: \_\_\_\_\_

(b) Social Security Number: \_\_\_\_\_

(c) E-Mail: \_\_\_\_\_

The provision of your social security number is voluntary, pursuant to the Federal Privacy Act of 1974. Your social security number will be used for purposes of investigation and verification to avoid errors of identity. The request for your social security number is made by the Arkansas State Board of Law Examiners pursuant to authority given it under the *Rules Governing Admission to the Bar of Arkansas*.

(c) Driver's License number and issuing State: \_\_\_\_\_

(d) Have you ever used or been known by any other name? \_\_\_\_\_

(Enter Yes or No)

If yes, state in full each name and the reasons for each name change.

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\_\_\_\_\_  
\_\_\_\_\_

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(e) If your name has ever changed, other than by operation of marriage or divorce, attach a certified copy of the order or other evidence of change.

(f) Present Work Address, including zip code: \_\_\_\_\_

(g) Present Home Telephone Number: \_\_\_\_\_

(h) Work Phone: \_\_\_\_\_

(i) Present Home Address: \_\_\_\_\_

IF YOUR ADDRESS CHANGES AFTER SUBMITTING THIS DOCUMENT, IMMEDIATELY PROVIDE WRITTEN NOTICE TO THE BOARD OF LAW EXAMINERS by sending an email with the new address to [BarExamApplicants@arcourts.gov](mailto:BarExamApplicants@arcourts.gov).

2.( a) Date of Birth \_\_\_\_\_

(b) Place of Birth \_\_\_\_\_

(c) Are you a U.S. Citizen? \_\_\_\_\_ (Enter yes or no). If no, explain your current residency status in an attachment to this application and provide appropriate documentation.

3. State every residence you have had for the preceding five years, beginning with the most recent. Show periods of residence by month and year.

Admission on Motion Application

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4. Make a complete statement of all employment you have had or business or occupation in which you have been engaged during the preceding five years. Begin with the most recent employment, including temporary or part-time work. For each period of private practice, either as a solo practitioner or member of a firm, complete and attach the “Certificate of Practice.”

Admission on Motion in this jurisdiction requires that you have been engaged in the “active practice of law” for three of the last five years. The “active practice of law” is defined by the Arkansas Supreme Court in *Rule XVI of the Rules Governing Admission to the Bar*.

Considering this information, the following inquiries are designed to determine whether your employment history meets that definition. If more space is required to explain your employment history, attach supplemental sheets as necessary to the completed application. For solo practice, enter your name as “Employer.”

State as to each employment, business, or other occupation, (a) Employer, (b) Address of primary location, including city, state, and zip code, (c) dates of employment from month/year to month/year, (d) reason for termination (if applicable), (e) name of direct supervisor, (f) whether employment was full-time, and (g) detailed list of responsibilities.

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If your employment changes before the Board certifies your Eligibility for licensure in Arkansas, promptly notify the Board by emailing [BarExamApplicants@arcourts.gov](mailto:BarExamApplicants@arcourts.gov).

If you undertake legal employment in Arkansas before your licensure in Arkansas, you must notify the Board and provide a detailed list of your responsibilities.

5. Have you been discharged or asked to resign from **any** employment?  
\_\_\_\_\_ (Enter Yes or No);

If yes, state the circumstances and the names and addresses of the employers.

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6. For each law school attended, list the name, location, dates of attendance (month and year), and what Degree was conferred.

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In addition, you must have the law school where you obtained your Juris Doctor Degree, complete the Law School Verification Form attached to this application.

7. (a) Have you ever served in the Armed Forces of the United States?  
\_\_\_\_\_ (Enter Yes or No).

If you have been discharged, attach a copy of the document evidencing the discharge. (DD214 or equivalent). If you have not been discharged, please state your current status on this application's attachment.

(b) Have you ever been a defendant in any court-martial proceeding?  
\_\_\_\_\_

(c) If the answer to (b) is yes, on a separate sheet that refers to this question, state the date, the nature of the charge, the facts, the disposition of the matter, and the location and designation of the military establishment where such proceedings took place.

(d) If you wish to count your military service as “the active practice of law,” provide officer evaluation reports or similar documents to establish your “service as a lawyer.”

8. List any debts which have been past due for more than 90 days, including the name of the Creditor, the date the debt was incurred, the original amount of the debt, and the balance due at the time you sign the Admission on Motion.

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9. Are there any unsatisfied judgments against you?\_\_\_\_\_.

If yes, provide the name, address, and zip codes of creditors, as well as the amounts, dates, and nature of the judgments. (Attach a separate sheet as necessary.)

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10. Have you ever been a party to, or had, or claimed any interest in, civil proceedings, including bankruptcy? \_\_\_\_\_

11. Have you ever been charged with, arrested for, convicted of, or pleaded guilty or nolo contendere for violating any law? \_\_\_\_\_

Exclude minor traffic violations that do not result in or are subject to incarceration.

12. Have you ever been accused of fraud, deceit, conversion of the property of another, or assault or battery of another in any civil proceedings? (civil includes any proceedings other than criminal). \_\_\_\_\_

NOTE: If your answers to any of the above are "Yes," on a separate sheet that references the question at issue, give full details for each incident, including dates, the court, case style, case caption, and docket number. State the facts and ultimate

disposition of the matter. Give names and addresses of all parties involved, as well as the name and address of legal counsel for all parties involved.

13. Within the past five (5) years, have you asserted any condition or impairment as a defense, in mitigation, or as an explanation for your conduct in the course of any administrative or judicial proceeding or investigation; any inquiry or other proceeding; or any proposed termination by an educational institution, employer, government agency, professional organization or licensing authority? \_\_\_\_\_

If yes, attach a supplemental sheet specifying all details, including pertinent names, addresses, dates and references to records, as appropriate.

14 Have you ever held any judicial office?\_\_\_\_\_.

If yes, state where, when, and offices held.

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15. (a) Have you ever been bonded under a Fidelity or Surety Bond?

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If yes, specify nature of office or position for which you were bonded, dates, amount of bond, name of surety company, if known, and whether anyone ever sought to recover upon your bond or cancel same.

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(b) Have you ever been refused a fidelity or other bond?

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If yes, provide the facts and circumstances of the refusal.

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16. Have you ever made application for admission to the Bar, or taken a Bar examination in any state or jurisdiction, including Arkansas? \_\_\_\_\_

If yes, state when, where, and the disposition made of such application, or the result of the examination.

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17. List all jurisdictions in which you are licensed to practice law and include dates of admission.

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18. Provide names and addresses of three persons in each jurisdiction where you practiced law with whom you were personally acquainted and who can confirm your status as an attorney engaged in the “active practice of law”.

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19. Have you ever received a disciplinary action or had your license suspended or revoked? \_\_\_\_\_

If yes, state full details, including the status of any disciplinary action, suspension or revocation.

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20. Attach the following for each jurisdiction where you hold a license to practice law. **Both documents must be originals and be dated within 90 days of the date of receipt of your application.**

1. Original Certificate of Good Standing from the Clerk of the Highest State Court. The Certificate must verify that you are currently in good standing or at the time your privilege to practice law terminated, you were in good standing.

2. An original disciplinary history statement from the Attorney Disciplinary Board for each state in which you are currently or have been licensed to practice law. The disciplinary history must detail each complaint made against you, including pending complaints, and the action taken by the disciplinary authority or verify no grievance or complaints have been made.

21. Have you ever applied for or been granted a license, other than as an attorney at law, the procurement of which required proof of good moral character or examination, (i.e., Certified Public Accountant, Patent Attorney, Real Estate Broker, etc.)? \_\_\_\_\_

For each application or license granted state the date it was granted, or withdrawn, and the name and address of the authority issuing it.

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(b) If the application was withdrawn or denied, provide details.

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(c) If any license has been revoked or terminated, provide the date the license was revoked or terminated, the manner of termination or revocation, and the reasons for the termination or revocation.

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(d) Was any disciplinary action ever taken against you by the authority issuing the license or governing your conduct as a licensee? \_\_\_\_\_.

If yes, provide the date any such action was taken, the details of each complaint, and the results of any action taken by the issuing or governing authority.

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22. Has your conduct ever been called into question with reference to the unauthorized practice of law in Arkansas or any other jurisdiction? \_\_\_\_\_

If yes, attach a supplemental sheet specifying all details, including the nature of the charges, the accuser, the name, address and telephone number of the investigative body and the disposition of the charges.

23. Have you ever engaged in conduct which might be regarded as evidencing an inclination to be dishonest, to take unfair advantage of others or to be disloyal to those to whom a loyalty is legally owed? \_\_\_\_\_

If yes, attach a supplemental sheet specifying all details.

24. Have you ever supported or advocated the overthrow of the U.S. government by force? \_\_\_\_\_

If yes, attach a supplemental sheet specifying all details.

25. Have you ever had a record sealed which contained facts relating to you? \_\_\_\_\_

If yes, attach a supplemental sheet specifying in detail the precise description of the record sealed, the name and address of the person or entity having custody of those records and the reasons a request was made for sealing those records.

26. Are there any facts not disclosed by your answers concerning your background, history, experience or activities which may cause one to question your character, fitness or ability to practice law? \_\_\_\_\_

If yes, attach a supplemental sheet specifying in detail all relevant facts.

27. INCOME TAX RETURNS: Have you filed federal and state income tax returns for all years when your income warranted such filings? \_\_\_\_\_

**PRIVACY RIGHT STATEMENT  
CRIMINAL BACKGROUND CHECK**

I understand that my personal information and fingerprints submitted by the State Board of Law Examiners are used to search against criminal identification records from both the Arkansas Crime Information Center (ACIC) and Federal Bureau of Investigation (FBI). I hereby authorize the release of any records to the person or agency listed above.

After viewing his/her identification record, if he/she believes it is incorrect or incomplete in any respect and wishes for changes, corrections, or updating of the alleged deficiency, he/she should make an application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge regarding the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Service (CJIS) Division, and ATTN: SCU, Mod. D2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that the agency verify or correct the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

28. I certify that I have read the following Arkansas Court Rules:
- (a) *Rules Governing Admission to the Bar;*
  - (b) *Arkansas Rules for Minimum Continuing Legal Education;*
  - (c) *Procedures Regulating the Professional Conduct of Attorneys at Law;*
  - (d) *Arkansas Rules of Professional Conduct; and,*
  - (e) *Arkansas Code of Judicial Conduct.*

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_ swear or affirm that I have read and understood this Admission on Motion Character Questionnaire and information sought herein, and I have fully and truthfully answered the questions, and have provided the information in the attached documents to the best of my own knowledge and ability.

I affirm my signature on the "Record Check Form" which is attached and incorporated herein.

I further understand that I am under a continuing duty to disclose any information pertinent to the questions asked in this character questionnaire.

I will inform the Board of Law Examiners of any such information that develops subsequent to submission of this character questionnaire.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Subscribed and sworn to me on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

Admission on Motion Application



**GENERAL AUTHORIZATION AND RELEASE**

I, (Name) \_\_\_\_\_,  
born in (City) \_\_\_\_\_, (State) \_\_\_\_\_,  
(Country) \_\_\_\_\_ on (Date) \_\_\_\_\_, having filed an  
application for admission to the Bar of Arkansas, hereby apply for a character  
report and consent to have an investigation made as to my moral character,  
professional reputation and fitness for the practice of law and such other  
information as may be received. I agree to give any further information which may  
be required concerning my past record.

I also authorize and request every person, firm, company, corporation,  
governmental agency (including bar admission boards or committees), law  
enforcement agency, court, association or institution having control of any  
documents, records or other information pertaining to me, to furnish to the  
Arkansas State Board of Law Examiners any such information including  
documents, records, disciplinary 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 Arkansas State Board of  
Law Examiners or any of its agents or representatives to inspect and make copies of  
such documents, records or other information.

A photocopy of this release shall be acceptable in lieu of the original. I hereby  
release, discharge and exonerate the Arkansas State Board of Law Examiners, its  
agents and representatives, and any person furnishing information 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  
Arkansas State Board of Law Examiners.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**SUPREME COURT OF ARKANSAS  
Office of Professional Programs  
State Board of Law Examiners  
Arkansas Continuing Legal Education Board**

To: Arkansas State Board of Law Examiners  
501 Woodlane St. Ste 303N  
Little Rock, AR 72201

Law School: \_\_\_\_\_

Address: \_\_\_\_\_

Re: \_\_\_\_\_  
Graduate's Full Name

\_\_\_\_\_

Last Four Digits - Social Security Number

\_\_\_\_\_

Date of Graduation

The graduate noted above received the Juris Doctor Degree from this institution on the date shown above. The graduate's records \_\_\_ do not \_\_\_ do indicate any honor code violations or any other derogatory information bearing on the graduate's character or fitness to practice law.

This law school was fully accredited by the American Bar Association in \_\_\_\_\_ . (year of accreditation).

\_\_\_\_\_  
Signature

(S E A L)

\_\_\_\_\_  
Title

Date \_\_\_\_\_

**CERTIFICATE OF PRACTICE  
COMPLETE FOR PERIODS OF PRIVATE PRACTICE  
AS A SOLO PRACTITIONER OR WORKING FOR A LAW FIRM**

I, \_\_\_\_\_, Judge of \_\_\_\_\_

in the State of \_\_\_\_\_, certify that I am well acquainted with \_\_\_\_\_, and I personally know that this individual was legally engaged in the active and continuous practice of law for the following period of time from \_\_\_\_\_ to \_\_\_\_\_.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature

Address: \_\_\_\_\_.

I, \_\_\_\_\_ certify that I know \_\_\_\_\_ and I personally know that he or she was legally engaged in the active and continuous practice of law for law for the following period of time from \_\_\_\_\_ to \_\_\_\_\_.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature

Address: \_\_\_\_\_.

I, \_\_\_\_\_ certify that I know \_\_\_\_\_ and I personally know that he or she was legally engaged in the active and continuous practice of law for law for the following period of time from \_\_\_\_\_ to \_\_\_\_\_.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature

Address: \_\_\_\_\_.