



**DISTRICT OF COLUMBIA COURT OF APPEALS
 COMMITTEE ON ADMISSIONS
 430 E Street NW, Room 123
 Washington, DC 20001**

SUPPLEMENTAL QUESTIONNAIRE

For Administrative Use Only Applicant ID #: _____
--

Applicant's Name: _____

SINCE the filing (or re-certification of, if applicable) of your application for admission to the Bar of the District of Columbia:

- | | YES | NO |
|--|--------------------------|--------------------------|
| 1. Have you been arrested for, plead guilty or no contest to, or been convicted of a felony or misdemeanor charge, other than a minor traffic charge? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you been adjudged liable in a civil proceeding involving a claim of fraud, conversion, breach of fiduciary duty, or legal malpractice? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you been adjudged bankrupt or insolvent? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you been disbarred, suspended, reprimanded, censured, or otherwise disciplined or disqualified as an attorney, as a member of any other profession, or as a holder of any public office? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are any charges or complaints now pending concerning your conduct as an attorney, as a member of any other profession, or as a holder of any public office? | <input type="checkbox"/> | <input type="checkbox"/> |

If your answer is "YES" to any of the above, complete and submit this form to the Committee on Admissions with all relevant documentation concerning the matter. Do not complete the oath of admission; certification is stayed while the Committee reviews the matter. You will be notified in writing when you may complete the oath.

If all responses are "NO," submit this form to the Office of the Committee on Admissions after you have completed the oath.

I declare, under penalty of perjury under the laws of the District of Columbia, that the statements herein are true and complete.

Signed on the ___ day of ____, 20__ at _____ (city) _____, (state) _____, (country) _____.

Printed name _____

Signature _____