

## **UTAH STATE BAR** LICENSED PARALEGAL PRACTITIONER **Certification of Substantive Law-Related Experience**

As proof of employment for each position, an applicant shall provide a **Certification of Substantive Law-Related Experience** signed by the supervising lawyer under penalty of perjury.

I,	, am a member in good standing of the Bar of	, Bar License	
No.	, am a member in good standing of the Bar of I hereby declare the following regarding	, applicant for licensure	
as a	licensed paralegal practitioner:		
1.	I acted as supervising lawyer for the above-named applicant.		
2.	The work performed under my supervision by the applicant was substantive law-related work required under Rule 15-703 and as defined in Rule 15-701, meaning "the provision of legal services as a paralegal, paralegal student or law student, including, but not limited to, drafting pleadings, legal documents or correspondence, completing forms, preparing reports or charts, legal research, and interviewing clients or witnesses." It does not include "routine clerical or administrative duties."		
3.	. As supervising lawyer, I personally directed, approved, and had responsibility for the work performed by the applicant.		
4.	During the <u>last three years</u> , the applicant performed a total of until (Month/Day/Year) (Month/Day/	hours of substantive law-related  /Year)	
5.	Of the total hours reported in paragraph 4, the applicant performed this work in a hours in the area of <b>Family Law</b> as outlined in <u>Rule 14-802(</u> b hours in the area of forcible entry and detainer (often referr outlined in <u>Rule 14-802(</u> c). c hours in the area of <b>Debt Collection</b> as outlined in <u>Rule 14-</u>	ed to as <b>Landlord-Tenant Law</b> ) as $\frac{802}{}$ (c).	
Signa	ature Date		
Firm	City,	State, ZIP	
Emai	il Address Phone	e Number	
	TE OF) : ss unty of)		
On t	thisday of, 20, before me,	, a notary public,	
pers	thisday of, 20, before me, sonally appeared who is personally known to a	me or proved to me on the basis of	
satis	sfactory evidence to be the person whose name is signed above.		
	NOTARY PUBLIC		

My Commission Expires: