

LPP APPLICANT VERIFICATION AND ACKNOWLEDGEMENT

_____ (initial) I, the undersigned Applicant, do hereby apply for admission to practice law as an LPP in the State of Utah in conformity Rule 14-802 and with the Rules Governing Licensed Paralegal Practitioners and upon satisfying all of the requirements for admission as an LPP to the Utah State Bar.

_____ (initial) I have proofread my application and can verify that there are no typographical errors.

_____ (initial) I fully understand **that the answers and statements made in this application are submitted under oath and that any inaccuracies, including omissions or false information, will be deemed intentional and may result in the denial of my application or the assessment of a fee.** I further understand that after my admission I will be subject to disciplinary action should the Bar find evidence that I have been less than candid on my application.

_____ (initial) I acknowledge that I have an ongoing responsibility to update this application in order to keep it both current and accurate. **I agree to promptly amend the application by submitting an Application Amendment Form within ten days of any change.** A failure to do so may result in denial of my application.

_____ (initial) I understand that I am under a duty to cooperate fully in providing any information asked of me and informing the Utah State Bar in the event anything requested or addressed in this application occurs following submission of this application, but prior to my taking the oath for admission to the Utah Supreme Court.

Write the following statement verbatim in the space below. Use a pen.

I have proofread my application and can swear under oath that the information contained therein is complete and accurate in accordance with the standards and instructions set forth in the Application and the Filing Instructions. I acknowledge the requirement to update this application within ten days of any change in circumstance which affects the answers in my Application, including but not limited to a change in residence, employment, contact information, or criminal or civil actions. I declare and affirm under penalty of perjury under the laws of the State of Utah that the application is true and correct to the best of my knowledge.

 Signature of Applicant

STATE OF _____)

: ss

County of _____)

On this _____ day of _____, 20____, before me, _____, a notary public, personally appeared _____, who is personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is signed above.

 NOTARY PUBLIC

My Commission Expires: