UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF WISCONSIN
Application for Admission to Practice

NAME _____ FIRM TELEPHONE: _____
LAST FIRST M.I.

FIRM NAME _____

FIRM ADDRESS _____
STREET/SUITE/P.O. BOX CITY STATE ZIP

STATE BAR NO. _____ FAX NUMBER: _____

I have been admitted to practice in the following named courts on the dates indicated:

Supreme Court of the United States on _____

Highest Court of the State of _____ on _____

U.S. District Court for the _____ District of _____ on _____

U.S. Court of Appeals for the _____ Circuit on _____

Dated: _____ **Applicant's Signature:** _____

Above named applicant admitted to practice this _____ day of _____ , _____

Clerk _____

OATH

I do solemnly swear that, to the best of my knowledge and ability, I will support and defend the Constitution of the United States against all enemies, foreign and domestic, and that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; and that I will demean myself as Attorney and Counselor of the United States District Court for the Eastern District of Wisconsin, uprightly and according to law.

I have read the standards of professional conduct for this district and agree to abide by those standards.

_____
Applicant's Signature

Subscribed and sworn to before me this _____ day of _____, _____

_____ _____
Notary's Signature Title

PROOF OF ELIGIBILITY (for court use only)

The following proof of eligibility was presented to me and found satisfactory:

Certificate of Good Standing from _____ dated _____

Affidavit of _____ dated _____

Oral motion and attestation of _____ dated _____

Clerk _____