INSTRUCTIONS FOR LAW STUDENT COMPLETING APPLICATION FOR
LIMITED STUDENT PRACTICE - SCR 2.540

The “CERTIFICATIONS AND APPROVAL OF APPLICATION TO PARTICIPATE IN
LIMITED STUDENT PRACTICE” form (page 1) must be completed as follows:

1. Complete and sign item 1.

2. Have the appropriate law school officials complete and sign items 2 and 3. Electronic
signatures/fill and sign signatures are acceptable.

3. Have the attorney who will supervise your activities as a legal intern complete and sign item 4.
Electronic signatures/fill and sign signatures are acceptable.

4. Leave Items 5 and 6 blank.

The “APPLICATION FOR APPROVAL TO PARTICIPATE IN LIMITED STUDENT
PRACTICE” must be completed as follows:

1. The answers to all questions must be completed, including complete addresses and zip codes.
Failure to fully and candidly complete the form may result in denial of your application. If there
is any doubt about how to answer a question, answer to the best of your ability. You may include
an attachment to the application providing further information, if necessary. **If there is any
doubt about whether to disclose information, err in favor of disclosure.**

2. The APPLICATION, the “AUTHORIZATION TO RELEASE RECORDS” and “OATH OF
LEGAL INTERN UNDER STUDENT PRACTICE RULE” must be signed by applicant and
an in-person notary and attached to your application. The “CERTIFICATION AND
APPROVAL OF APPLICANT TO ENGAGE IN LIMITED STUDENT PRACTICE” form must
also be attached to your application as well.

Each applicant is responsible for reading the current rules relating to the approval of law students
to serve as legal interns under Limited Student Practice (SCR 2.540).

If you have any questions in regard to this application, please contact the Kentucky Office of Bar
Admissions at (859) 246-2381 or by email at info@kyoba.org

Mail or hand-deliver application, along with $25 certified check or money order to:

Kentucky Office of Bar Admissions
1510 Newtown Pike, Suite 156
Lexington, KY 40511-1251
Phone: (859) 246-2381
Fax: (859) 246-2385
E-mail: info@kyoba.org
CERTIFICATION AND APPROVAL OF APPLICANT TO PARTICIPATE IN LEGAL INTERNSHIP PROGRAM

1. I, ____________________________, a law student at ________________________________, hereby apply for approval to participate in the Legal Internship Program pursuant to the provision of the Limited Student Practice provisions of SCR 2.540.

Signature of Applicant________________________________ Date: _______________

2. I, ________________________________________, Faculty Director of the law school program in which the aforesaid applicant seeks to participate pursuant to the provisions of SCR 2.540, hereby approve said applicant for participation in the Legal Internship Program.

Signature of Faculty Director______________________________ Date: _____________

3. I, ________________________________________, Dean/Associate Dean of applicant’s law school, hereby certify that the aforesaid applicant has successfully completed two-thirds of the academic hour requirements for the first degree in law, and is otherwise approved for participation in the Legal Internship Program pursuant to the provision of SCR 2.540.

Dean/Associate Dean__________________________ Date: _____________
Law School____________________________________

4. I, ________________________________________, a member in good standing of the Kentucky Bar, hereby certify that I will personally supervise the activities of the aforesaid applicant as is required for participation in the Legal Internship Program pursuant to the provision of SCR 2.540(c).

Sponsor ____________________________________ Date: _______________

5. I, ________________________________________, on behalf of the Character and Fitness Committee of the Kentucky Office of Bar Admissions, hereby certify that the aforesaid applicant appears qualified to perform legal services as an intern under the provisions of SCR 2.040 and SCR 2.540.

Signature ______________________________________________ Date: _________________
General Counsel to Character & Fitness Committee

6. I, Laurance B. VanMeter, Chief Justice of the Supreme Court of Kentucky, hereby approve the aforesaid applicant for participation in the Legal Internship Program established by SCR 2.540.

Signature _____________________________________________ Date: _______________
Laurance B. VanMeter, Chief Justice
Supreme Court of Kentucky
APPLICATION FOR PARTICIPATION IN
LIMITED STUDENT PRACTICE UNDER SCR 2.540

I hereby make application for approval to participate in Limited Student Practice and in support of such application submit the following information and make the following statements in good faith, having read the Rule of the Supreme Court of Kentucky, relating to the qualification, duties, and obligations of students applying for Limited Student Practice (SCR 2.540):

(Note to Applicants – Candor in providing the following information is of the utmost importance. Please provide full disclosure of events with sufficient detail to permit proper consideration of all information provided. If space is inadequate, please include an attachment.)

1. LEGAL INTERNSHIP INFORMATION:

Name of Program ____________________________________________________________

Name of Supervising Attorney__________________________________________________

Address_____________________________________________________________________

Phone Number__________________ Email of supervisor_____________________________

2. APPLICANT INFORMATION:

Name ________________________________________________________________________

First                                  Middle                                         Last

SSN_______________________________ Date of Birth _________________________

Place of Birth ____________________________

Any other name(s) by which applicant has previously been known (maiden/married names, etc.):

____________________________________________________________________________

____________________________________________________________________________

Father’s name and address (if living) ____________________________________________

____________________________________________________________________________

Mother’s name and address (if living) ____________________________________________

____________________________________________________________________________
3. RESIDENCE:

List all permanent addresses for the past five years.

**Current Residence**

Street address ___________________________________________________________

City/State__________________________________________________________Zip____

Phone: ____________________ Business Phone: ______________________

Email Address: _________________________________________

**Prior Addresses**

From Mo./Yr. ________ To Mo./Yr.________

Street address________________________________________________________

City/State_____________________________________________________Zip_______

From Mo./Yr. ________ To Mo./Yr.________

Street______________________________________________________________

City/State_____________________________________________________Zip_______

From Mo./Yr. ________ To Mo./Yr.________

Street______________________________________________________________

City/State_____________________________________________________Zip_______

From Mo./Yr. ________ To Mo./Yr.________

Street______________________________________________________________

City/State_____________________________________________________Zip_______

From Mo./Yr. ________ To Mo./Yr.________
4. EDUCATION:

**Law School** Current Law School attending: __________________________________

Address _________________________________________________________________
_____________________________________________________________________

Date of anticipated graduation/ J.D. date____________________________________

Name and date of attendance at any other law schools and reason for transfer:
________________________________________________________________________
________________________________________________________________________

**College or University**

The name and complete address for each undergraduate college/university attended:

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<th>NAME</th>
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5. CHARACTER REFERENCES: Two practicing Attorneys or Judges and two members of the public at large. (No reference should be a relative and no two persons listed should be members of the same household.)

Name________________________________________________________

Address_____________________________________________________

City/State__________________ Zip________________

Name________________________________________________________

Address_____________________________________________________

City/State__________________ Zip________________
6. EMPLOYMENT: List any and all employment that you have held during the last five (5) years. Include temporary, part-time or full-time employment. If you have additional employment, attach a separate sheet.

Began Mo./Yr. ___________ Ended Mo./Yr. ___________

Position Held ____________________________

Name of Employer __________________________ Phone number ____________________

Name of Supervisor ____________________________

Address __________________________________________

City/State_____________________________ Zip __________

Reason for Leaving: ______________________________________________________

Began Mo./Yr. ___________ Ended Mo./Yr. ___________

Position Held ____________________________

Name of Employer ____________________________

Name of Supervisor ____________________________

Address ________________________________________________

City/State_____________________________ Zip __________

Reason for Leaving: ______________________________________________________
Began Mo./Yr.__________ Ended Mo./Yr.______________

Position Held_________________________

Name of Employer_________________________ Phone number_________________

Name of Supervisor_________________________________________________________

Address__________________________________________________________

City/State__________________________________________________Zip_____________

Reason for Leaving_________________________________________________________

Began Mo./Yr.__________ Ended Mo./Yr.______________

Position Held_________________________

Name of Employer_________________________ Phone number_________________

Name of Supervisor_________________________________________________________

Address:__________________________________________________________

City/State__________________________________________________Zip_____________

Reason for Leaving:_________________________________________________________

FORM 2.540-1 Rev. 01/2023
7. CHARACTER AND FITNESS QUESTIONS:

(a) Have you ever been suspended, warned, disciplined by any college, university, law school or teacher, sanctioned in any class, placed on academic or disciplinary probation, expelled or requested to resign from a college, university or law school?

☐ Yes ☐ No

(b) Have you ever failed to answer fully and truthfully all questions on the application for admission to any educational facility?

☐ Yes ☐ No

(c) Have you ever been discharged, disciplined, requested formally or informally to resign from or terminate employment?

☐ Yes ☐ No

(d) Are there any unsatisfied judgments, liens or court orders of continuing effect against you?

☐ Yes ☐ No

(e) Have you ever defaulted on a student loan?

☐ Yes ☐ No

(f) Have you ever been a party in any civil or administrative proceeding?

☐ Yes ☐ No

(g) Have you ever received a citation for a code or ordinance violation, been taken into custody or have you ever been charged with any misdemeanor (excluding traffic), or any felony? (A positive response is to be given, when appropriate, regardless of the ultimate disposition of a citation or charge and regardless of whether a citation or charge has been expunged, sealed, segregated, voided or diverted.)

☐ Yes ☐ No

(h) Do you currently have any condition or impairment including, but not limited to, (i) any related substance or alcohol abuse, or (ii) a mental, emotional, or nervous disorder or condition which in any way affects, or if untreated could affect your ability to perform any of the obligations and responsibilities of a legal intern in a competent and professional manner? ("Currently" means recently enough so that the condition could reasonably have an impact on your ability to function as a legal intern.)

☐ Yes ☐ No

(i) Have you ever organized or helped to organize or become a member of any organization or group of persons which, during the period of your membership or association, you knew was advocating or teaching that the government of the United States or any state or country or any political subdivisions thereof should be overthrown or overturned by force, violence or any unlawful means?
(j) Are there any other incidents(s) or occurrence(s) in your life, which is not otherwise referred to in this application, which has bearing, either directly or indirectly, upon your character and fitness?

☐ Yes ☐ No

If you answered “yes” to any of the questions outlined in (a) through (j) above, please attach a full explanation of the circumstances. Include in the explanation the nature of the event or condition, the date of the event or occurrence of the condition, and details of the ultimate resolution of the event or condition.

8. MILITARY SERVICE: Are you now or have you ever been a member of the armed forces of the United States or any other country including the National Guard or any of the reserve components?

☐ Yes ☐ No

If yes, list:

(a) Date of periods of active duty________________________________________

(b) Branch of Service__________________________________________________

(c) Highest rank achieved and Service Number/Social Security Number used:
_________________________________________________________________

(d) Date and type/explanation of discharge _________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
9. **VERIFICATION:** I hereby certify as follows:

(a) I will immediately report to the Office of Bar Admissions any changes in conditions or to the answers given herein. I will also immediately provide any information regarding events that might reflect on my moral character and integrity, including but not limited to academic discipline or criminal charges.

☐ Yes  ☐ No

(b) I have read Supreme Court Rule 2.540 that is presently in effect, relating to the qualification, duties and obligations of Legal Interns and I am familiar with and understand these provisions.

☐ Yes  ☐ No

________________________________________
Signature of Applicant

STATE OF ______________________ COUNTY OF ______________________

Sworn to and subscribed to before me this ______ day of ___________________,20____

________________________________________
Signature of Notary Public

My commission expires: __________________
AUTHORIZATION TO RELEASE RECORDS

Upon presentation of the original or a photocopy of this signed authorization,

I, ____________________________________________________________,
(name of applicant)

authorize any and all persons or institutions to disclose any and all information to the Kentucky Office of Bar Admissions, including but not limited to copies of medical and legal records. I further authorize any inquiries, questions or interrogatories concerning me, and authorize the appearance and testimony concerning me before the Kentucky Office of Bar Admissions or any agent or representative, as requested by that Office.

The purpose of this authorization for disclosure is to provide whatever information that is necessary to assist the Office of Bar Admissions in its investigation of my character and fitness for my approval as a Legal Intern in the Commonwealth of Kentucky.

I hereby release, discharge and exonerate the Kentucky Office of Bar Admissions, its agent and representatives, and any program, institution or individual, its agents and representatives, 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 Office of Bar Admissions.

________________________________________
Signature of Applicant

STATE OF ______________________ COUNTY OF ______________________

Sworn to and subscribed to before me this _____ day of_________________, 20____

_____________________________________________
Signature of Notary Public

My commission expires: _____________________
OATH OF LEGAL INTERN UNDER STUDENT PRACTICE RULE (SCR 2.540)

I, ____________________________, do solemnly swear that I will, as a Legal Intern, support and defend the Constitution of the United States of America and the Constitution of the State of Kentucky; that cognizant of the trust placed in me and the responsibility it carries, I will conduct myself in all matters to the extent given me as an officer of the Court with the utmost fidelity toward the Court and all persons whose affairs are in any way entrusted to me, that I will neither take part in deception of the Court, nor allow deception to take place, and should any be practiced will inform the Court; that I will accept no remuneration for services performed as a Legal Intern except those specifically provided by the Rules of the Supreme Court; that I subscribe to and will abide by the Supreme Court of Kentucky; and that I will so exercise these privileges given me that it may be alike useful in the service of justice and in my preparation to assume full responsibility later as a member of the bar.

________________________________________
Signature of Applicant

STATE OF ______________________ COUNTY OF ______________________
Sworn to and subscribed to before me this _____ day of ________________, 20___

________________________________________
Signature of Notary Public

My commission expires: ____________________