United States District Court
Western District of Kentucky
Office of the Clerk
United States Courthouse
601 West Broadway, Room 106
Louisville, Kentucky 40202-2249
www.kywd.uscourts.gov
(502) 625-3500

James J. Vilt, Jr. Clerk of Court

Drew D'Agostino Chief Deputy Clerk

#### IN RE: ADMISSION TO PRACTICE BY APPOINTMENT BEFORE THE COURT

In reply to your inquiry about admission to practice by appointment before the United States District Court for the Western District of Kentucky, please contact your local office to schedule a date for your admission. Pursuant to LR 83.1 and LCrR 57.1 of the Joint Local Rules, a member in good standing of this Court must make a motion in open court for your admission. The presiding judge will administer the oath, and you must sign the admission card and tender the \$218.00 admission fee by check made payable to the "Clerk, U.S. District Court." Please do not send your check in advance of the scheduled admission date. You must create and request e-filing privileges to our court through your PACER account, at www.pacer.gov.

NAME OF APPLICANT	
HOME ADDRESS	
FIRM NAME	
OFFICE ADDRESS	
OFFICE TELEPHONE	BAR NUMBER
DATE OF BIRTH	PLACE OF BIRTH
UNIVERSITY ATTENDED	DEGREE & DATE
LAW SCHOOL ATTENDED	DEGREE & DATE
DATE OF ADMISSION TO SUPREME COURT OF KENTUCKY	
OTHER STATE AND FEDERAL COURTS IN WHICH YOU ARE ADMITTI	( )
NAME OF SPONSOR	
SPONSOR'S TELEPHONE NO.	
PURSUANT TO JOINT GENERAL ORDER 08-02, I HAVE COMPLETED M TRAINING THROUGH (select one):  Web-Page Tutorial Court Personnel KY Bar A Training in other Jurisdiction or Other Method (Please Explain)	association CLE Course
FEE PAID: DATE:	
RECEIPT NUMBER:	
BY:	
ADMITTED:	

## UNITED STATES DISTRICT COURT WESTERN DISTRICT OF KENTUCKY

## IN RE: ADMISSION OF ATTORNEY TO PRACTICE-SPONSOR'S AFFIDAVIT AND MOTION

#### **SPONSOR'S AFFIDAVIT**

STATE OF		
COUNTY OF	_	
	, having been duly sworn, d	eposes and states as
follows:		
That I was duly admitted to practic District of Kentucky onsaid court.		
That this affidavit is submitted in s for admission to the Bar of the United State	upport of the application of s District Court for the Western	District of Kentucky.
That I have read the said application	on and believe the statements the	erein to be true and correc
That I vouch for the good moral an applicant has been admitted to practice before Kentucky. In my opinion, the applicant is for States District Court for the Western District Dated at	ore and is in good standing with ully qualified to be admitted to pet of Kentucky.	the Supreme Court of oractice before the United
(Location)		
	Signature	
	Name	
	Address	
Subscribed and sworn to before me this	day of	, 20
	Notary Public	
	My Commission Expires	<b>:</b>

### **SPONSOR'S MOTION**

, sponsor for	the aforesaid applicant, hereby moves that
	the Bar of the United States District Court for the
Western District of Kentucky and be permitted to	<u>.</u>
counselor-at-law for all proper purposes. The appl	licant has requested to be admitted by mail rather
than by person appearance in open court.	
	Signature
	Digitate
O A THAT A THOU TO BE A DAME WITH THE	D WHEN PEONEST FOR A DAMESTON IS
OATH/AFFIRMATION TO BE ADMINISTERED PERFECTED BY MAIL:	D WHEN REQUEST FOR ADMISSION IS
TERFECTED BY MAIL:	
	wear or affirm that I have been admitted to practice
before and am in good standing with the Supreme	
I will support and defend the Constitution of the U	dvocate, proctor and attorney of this court, and that
1 win support and detend the Constitution of the C	The States.
	Applicant Signature
Subscribed and sworn to/affirmed before me this _	day of, 20
	Notary Public
	Tional J Tubile
	<u> </u>
	Commission Expiration
on.	AD TO
OR	RDER
Having determined after reviewing the attached at	ffidavit that the applicant is qualified to be admitted,
IT IS HEREBY ORDERED the above motion is G	DANTED and that the applicant he admitted to
practice before the United States District Court for	
Date Judge	The Western District of Renderly.
Date	Judge

# United States District Court WESTERN DISTRICT OF KENTUCKY

RE: APPLICATION FOR ADMISSION - AUTHO	ORIZATION AND RE	ELEASE
Ι,	, whose Soc	ial Security Number is
, having filed an applic consent to have an investigation made as to my months fitness for the practice of law and such information authority. I agree to give any further information vectord.	oral character, profession as may be received, r	onal reputation and reported to the admitting
I also authorize and request every person, fragency, court, association, or institution having coninformation pertaining to me, to furnish to the Cler Western District of Kentucky any such information association files regarding charges or complaints for closed, or any other pertinent data, and to permit the such documents, records and other information.	ntrol of any documents k, United States Distri n, including documents iled against me, forma	s, records, or other ict Court for the s, records, bar l or informal, pending or
I hereby release and discharge, the state addression, its agents and representatives, and any pall liability of every nature and kind arising out of documents, records, and other information to or by	person so furnishing ir the furnishing or inspe	nformation from any and
I have read the foregoing document and har The information is complete and true of my own k		nation fully and frankly.
	(Signature of Applicant)	
Subscribed and sworn to before me this	day of	, 20