

INSTRUCTIONS: This is a fillable form: to begin, click on a section and then tab to all other sections. Should you experience difficulty, you may print out this form and fill it in by hand. Fill out the form, print, keeping a copy for yourself, and mail to BOARD OF BAR EXAMINERS, 2418 Airport Road, Suite 2, Barre, VT 05641. You are advised to read the Rules of Admission to the Vermont Bar available on our website at www.vermontjudiciary.org Questions should be directed to jud-attylicensing@state.vt.us

TERMINATION OF CLERKSHIP FORM

Registrant Name: _____ devoted the following amount of time to this clerkship:

A: not less than 25 hours during a 7 consecutive day period; **OR** B: not less than 30 hours in a 14 consecutive day period.

State below the **number of weeks** in which you, the clerk, devoted to your registered law office clerkship:

_____ First Month	_____ Fifth Month
_____ Second Month	_____ Sixth Month
_____ Third Month	_____ Seventh Month
_____ Fourth Month	_____ Eighth Month

Twelve weeks of study are required under Option A and 24 weeks of study are required under Option B to fulfill the clerkship requirement. This completed form should be filed as soon as possible after completion of the clerkship.

Signature of Registrant

CERTIFICATE OF JUDGE OR ATTORNEY: REGISTRANT'S TERMINATION OF LAW OFFICE CLERKSHIP

Judge or Attorney Name: _____ of (Town/City) _____

Vermont, pursuant to the provisions of the Rules of Admission, hereby certifies that on (Date) _____

(Registrant) _____ terminated a clerkship in my office and under my supervision.

Signature of Judge or Attorney

Date