



**VERMONT SUPREME COURT
OFFICE OF THE STATE COURT ADMINISTRATOR
BOARD OF MANDATORY CONTINUING LEGAL EDUCATION**

**Attorney Licensing Statement
and
Certification of Compliance with the Rules for Mandatory Continuing Legal Education**

I INSTRUCTIONS

This form has been prescribed by the State Court Administrator as the attorney licensing statement for both first-time licensing and biennial license renewal. It has also been approved by the Board of Mandatory Continuing Legal Education as the biennial report of compliance with the Rules for Mandatory Continuing Legal Education.

An attorney who completes and submits this form acknowledges having reviewed and complied with Administrative Order 41, Administrative Order 44, and the Rules for Mandatory Continuing Legal Education.

For Renewing Attorneys: YOU ARE REQUIRED TO COMPLETE AND FILE THIS FORM AND PAY THE REQUIRED FEE EVERY TWO YEARS, ON OR BEFORE JULY 1 FOLLOWING THE END OF THE APPLICABLE TWO-YEAR REPORTING PERIOD. ATTORNEYS WHO FAIL TO MEET THE JULY 1 DEADLINE ARE SUBJECT TO IMMEDIATE SUSPENSION AND THE IMPOSITION OF AN ADDITIONAL FEE. From May 1 through July 1, you can renew and pay online rather than submit this form, by going to <https://secure.vermont.gov/courts/licensing>. If you renew online, you do not need to otherwise submit this form.

Complete this form, retain a copy, and mail to:

Office of Attorney Licensing
Costello Courthouse
32 Cherry Street, Suite 213
Burlington, VT 05401

This form must be accompanied by a check for the appropriate fee per the [fee schedule](#) approved by the State Court Administrator. Checks should be made payable to ATTORNEY LICENSING.

If you intend to relinquish your license, do not fill out this form. Contact the Office of Attorney Licensing.

II CONTACT INFORMATION (each field is required, except that attorneys licensing for the first time should leave the space for attorney license number blank)

1. Last name:
2. First name:
3. Attorney License Number:
4. Email address:
5. Phone:
6. Business address:
7. Residential address:

**III CERTIFICATION OF COMPLIANCE WITH THE RULES FOR MANDATORY CONTINUING LEGAL EDUCATION
(for renewing attorneys only)**

For the two-year reporting period ending June 30 of this year:

_____ I have been on ACTIVE status and thus was required to complete 20 hours of accredited continuing legal education, with at least 2 of those hours in legal ethics and no more than 10 of those hours in “self-study,” as defined by the Rules for Mandatory Continuing Legal Education.**

_____ I satisfied the continuing legal education requirement.

_____ I did not satisfy the continuing legal education requirement. I have filed, or will file within 10 days, a makeup plan with the Board of Mandatory Continuing Legal Education.

_____ I did not satisfy the continuing legal education requirement but am claiming INACTIVE status for the upcoming reporting period that begins on July 1 of this year. I understand that I will be placed on Special Waiver status and hence will be subject to the requirements of Section 11(c) of the Rules for Mandatory Continuing Legal Education should I at any time seek to be reinstated to ACTIVE status.

_____ I have been on PRO BONO EMERITUS status and thus was required to complete 8 hours of accredited continuing legal education, with at least 2 of those hours in legal ethics.**

_____ I satisfied the continuing legal education requirement.

_____ I did not satisfy the continuing legal education requirement. I have filed, or will file within 10 days, a makeup plan with the Board of Mandatory Continuing Legal Education.

_____ I have been on JUDICIAL status and thus am exempt from the continuing legal education requirement.

_____ I have been on INACTIVE status and thus am exempt from the continuing legal education requirement.

_____ I have been on INACTIVE status for at least three years immediately preceding July 1 of this year, but I am claiming ACTIVE status for the upcoming reporting period that begins on July 1 of this year. Within the two years immediately preceding this July 1, I completed 20 hours of accredited continuing legal education, with at least 2 of those hours in legal ethics and no more than 10 of those hours in “self-study,” as defined by the Rules for Mandatory Continuing Legal Education.**

_____ My license is on administrative or disciplinary suspension. (Contact the Office of Attorney Licensing for additional forms and requirements.)

****Any hours of continuing legal education that were completed pursuant to a prior makeup plan cannot be used to satisfy other continuing legal education requirements.**

IV LICENSING STATUS (for the upcoming reporting period**)

Please indicate the licensing status that you are claiming for the upcoming reporting period**.

_____ ACTIVE: An attorney on active status is authorized to practice law in the State of Vermont and must comply with the Rules for Mandatory Continuing Legal Education.

_____ INACTIVE: An attorney on inactive status is not authorized to practice law in the State of Vermont and is exempt from compliance with the Rules for Mandatory Continuing Legal Education, except to the extent that those rules apply to attorneys who transfer to active status.

_____ JUDICIAL: An attorney who is a Supreme Court Justice, Superior Judge, Magistrate, or Judicial Bureau Hearing Officer has judicial status and is exempt from compliance with the Rules for Mandatory Continuing Legal Education.

_____ PRO BONO EMERITUS: An attorney on pro bono emeritus status is not authorized to practice law, except to provide legal services without fee or expectation of fee, under the auspices of a nonprofit organization, to persons of limited means or to charitable, religious, civic, community, governmental, and educational organizations which are designed primarily to address the needs of persons of limited means. An attorney on pro bono emeritus status is subject to the Rules for Mandatory Continuing Legal Education, except that the attorney must complete at least 8 hours of accredited continuing legal education, including at least 2 hours in ethics, during each 2-year licensing period. AN ATTORNEY CLAIMING THIS STATUS FOR THE FIRST TIME MUST ALSO SUBMIT A COMPLETED PRO BONO EMERITUS LICENSING STATEMENT. PLEASE ALSO REVIEW SECTION 11 OF ADMINISTRATIVE ORDER 41 FOR A FULL UNDERSTANDING OF PRO BONO EMERITUS STATUS.

For Newly Admitted Attorneys: Note that requirements of the Rules for Mandatory Continuing Legal Education (“MCLE”) are separate and in addition to your first-year continuing legal education requirements specified in Rules 12 and 15 (although all continuing legal education courses taken to satisfy the Rule 12 and 15 first-year CLE requirements will count toward the MCLE requirement during your first reporting period). Also, you are subject to the Rule 12 and 15 requirements regardless of the licensing status you are claiming.

**** Upcoming Reporting Periods**

For Attorneys Licensing for the First Time (except Pro Bono Emeritus attorneys): Your upcoming reporting period begins on the date of admission and ends on June 30 of the second full year following the year of admission.

For Pro Bono Emeritus Attorneys Licensing for the First Time: Your upcoming reporting period begins on the date you receive your licensing card and ends on June 30 of the second full year following the year of licensing.

For Renewing Attorneys: Your upcoming reporting period begins on July 1 and ends on June 30 of the second succeeding year.

V POOLED INTEREST BEARING TRUST ACCOUNT INFORMATION

Administrative Order 41 requires an attorney who claims ACTIVE status to provide the account number for the attorney’s pooled interest bearing trust account (IOLTA) or to claim an exemption.

Please list each pooled interest bearing trust account. Include additional pages if necessary.

Account number:
Financial Institution:

Account number:
Financial institution:

Account number:
Financial institution:

OR

Please certify why you are not providing an account number for a pooled interest bearing trust account.

_____ I am claiming ACTIVE or PRO BONO EMERITUS status, but, as defined by Rule 1.15(a)(2) of the Rules of Professional Conduct, I do not handle or receive funds of clients or third persons “in connection with a representation” and have no reasonable expectation of doing so during the upcoming reporting period.

_____ I am claiming INACTIVE or JUDICIAL status.

VI CERTIFICATION OF REGISTRATION OF E-MAIL ADDRESS WITH eCABINET

_____ I certify that I have registered, or will register within 24 hours of receiving my license card, at least one e-mail address with eCabinet pursuant to Administrative Order 44 and the Rules for Electronic Filing.

OR

_____ I am exempt from this registration requirement because I am claiming INACTIVE status.

VII DECLARATION REGARDING TAXES DUE TO THE STATE OF VERMONT

_____ By signing and submitting this licensing statement, I declare, under the pains and penalty of perjury, that I am in good standing with respect to any and all taxes due to the State of Vermont, as of the date of my signature and as defined by Administrative Order 41.

VIII CERTIFICATION REGARDING CHILD SUPPORT

_____ I certify that I am not under an obligation to pay child support or am in good standing with respect to any and all child support that I am under an obligation to pay.

IX VERMONT BAR FOUNDATION OPT-IN

The Vermont Supreme Court has authorized the attorney licensing statement to include an “opt-in” for attorneys to donate to the Vermont Bar Foundation (“VBF”) to support legal services for the disadvantaged. **By opting in, an attorney commits to making a donation, in the amount of his or her own choosing, to the VBF.**

To make your optional donation, you can visit the VBF website at <https://vtbarfoundation.org/donate/> or mail your donation to: Vermont Bar Foundation, P.O. Box 1170, Montpelier, VT 05601-1170.

_____ **I opt-in to make a donation to the Vermont Bar Foundation.**

X ATTESTATION AND SIGNATURE

By signing and submitting this document, I attest that the representations herein are true and that I have not omitted any information that is reasonably responsive or related to the information requested. I also certify that I have reviewed Administrative Order 41 and that I understand the licensing status that I have claimed.

Dated this _____ day of _____, 20_____.

Signature of Attorney

***FOR RENEWING ATTORNEYS: THE DEADLINE FOR RENEWING YOUR LICENSE IS JULY 1.
ATTORNEYS WHO FAIL TO MEET THIS DEADLINE ARE SUBJECT TO IMMEDIATE SUSPENSION
AND THE IMPOSITION OF AN ADDITIONAL FEE.***