

Re-Registration Application for Supervised Practice Pursuant to Tenn. Sup. Ct. Rule 7, 10.04

Applicant Name: _____

Applicant Email: _____

By affixing my signature to this document, I certify the following (check all that apply):

I was unsuccessful on the bar examination and completed an application for re-examination within 10 days of release of examination scores;

I am not licensed in any other U.S. jurisdiction;

I graduated from law school¹ on (list month/year): _____

My first application for admission to practice law in Tennessee² was (list month/year):

I have a new Supervising Attorney. **If yes, complete the following:**

Supervising Attorney:

Name: _____ BPR # _____

Address: _____

Phone: _____

Email: _____

Submitted with this registration application is an affidavit from an attorney licensed and in good standing in Tennessee stating that the attorney agrees to supervise the applicant in accordance with the provisions of Section 10.04.

By signing this document, I SWEAR OR AFFIRM

- that all of the information submitted to the Board in conjunction with this request is correct to the best of my knowledge;
- that the answers and statements on this request are complete, true, and correct; and
- that I have not altered this application form, including the wording of any question, statement, or agreement, in any way other than to note my answers.

I declare under penalty of perjury pursuant to 28 U.S. Code § 1746 that I have read the foregoing application and that the foregoing statements are true and complete.

Signature of Applicant

Date: _____

¹ The privilege to engage in supervised practice continues no more than 16 months from the date applicant graduates from law school.

² By examination or transferred UBE score

Submit this completed form with your re-registration fee of \$25.00 to:
Tennessee Board of Law Examiners, 511 Union Street, Suite 525, Nashville, TN 37219.