

Pennsylvania Board of Law Examiners  
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### *Attorney Verification*

I, (your name) \_\_\_\_\_, a licensed attorney in the jurisdiction(s) of \_\_\_\_\_, am currently or will be employed by or associated with an organized legal services program in this Commonwealth providing legal assistance to indigents in civil matters or a public defender's office or a defender association in this Commonwealth providing legal assistance to indigents in criminal matters. I certify that I will perform legal services within this Commonwealth solely for the organized legal services program or public defender's office or defender association identified in this application and for the purpose of providing assistance to indigents in criminal or civil matters.

I understand that a limited license under Rule 311 permits me to work for \_\_\_\_\_, but I may not engage in the practice of law in any other capacity. I understand that my admission to practice law in Pennsylvania will expire after thirty months or when I cease my employment with \_\_\_\_\_, whichever shall occur first. The Court for good cause shown may extend my period of practice. I further understand that severe penalties may be incurred for the unauthorized practice of law.

In accordance with the online application and checklist instructions:

\_\_\_\_\_ I have attached a detailed list of my daily duties while employed in a legal capacity in the Commonwealth of Pennsylvania;

I verify that the statements of fact made by me in this personal disclaimer are true and correct and that they are made subject to the penalties of 18 Pa. C.S. § 4904 relating to unsworn falsification to authorities. I further verify that I have not omitted any facts or matters pertinent to this disclaimer.

Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_