

**APPLICATION FOR ADMISSION TO PRACTICE LAW
UNITED STATES DISTRICT COURT
DISTRICT OF SOUTH DAKOTA**

Full Name: _____ Admission Fee: \$250
(As you wish it to appear on your certificate) (To be paid at time of swear in)

Birth Date: _____
Home Address: _____

Law Firm Name: _____

Office Address: _____

Telephone: _____

Admission to State Bar Associations: _____
(NOTE: You MUST be an active member of the South Dakota State Bar Association to be admitted to the Federal Bar of the United States District Court for the District of South Dakota)

College(s): _____ Year Graduated: _____

Law School: _____ Year Graduated: _____

Have any disciplinary or grievance procedures been initiated against you? Yes _____ No _____
If "yes," please state where, when, basis and resolution:

References:

Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
_____	_____

Phone Number: _____ Phone Number: _____

(NOTE: References MUST be members in good standing of the Federal Bar, United States District Court for the District of South Dakota)

DISTRICT COURT USE ONLY:

_____ South Dakota State Bar contacted on _____.

_____ Applicant is member in good standing of the South Dakota State Bar.

_____ References are members in good standing of the Federal Bar.

_____ Additional Notes:

_____ (Deputy Clerk)

**AUTHORIZATION TO RELEASE INFORMATION
(PRIVATE PERSON OR ORGANIZATION)
TO UNITED STATES DISTRICT COURT OFFICER**

TO WHOM IT MAY CONCERN:

I, _____, the undersigned, hereby authorize the Clerk, United States District Court for the District of South Dakota, or its authorized representative(s) or employee(s), bearing this release or copy thereof, to obtain any information in your files pertaining to my:

Employment; and

Education Records (including but not limited to academic achievement, attendance, personal history, and disciplinary records).

I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the United States District Court's official use.

I hereby release you, as custodian of such records, any school, college, university, or other educational institution; any employer, or retail business establishment including its officers, employees, or related personnel both individually and collectively, from any and all liability for damages or whatever kind which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request for information or any other attempt to comply with it.

The information hereby obtained by the aforementioned District Court office is to be used only for the purpose of admission to United States District Court for the practice of law as an officer of the Court.

(Authorizing Signature – Full Name)

Date: _____

(Full Name - Printed or Typed)

Mail Form only to the listed office in which you will want to be sworn in:

United States District Court
District of South Dakota
Clerk's Office, Rm 405
225 South Pierre Street
Pierre, SD 57501

United States District Court
District of South Dakota
Clerk's Office, Rm 128
400 S. Phillips Ave.
Sioux Falls, SD 57104

Andrew W. Bogue
Federal Bldg. & US
Courthouse
Clerks Office Rm 302
515 Ninth Street
Rapid City, SD 57701