

Midwest Office  
25 W Main Street, Suite 500  
Madison, WI 53703

Skenandore  
Wilson LLP

Washington DC Office  
14500 Pennsylvania Avenue, NW, Suite 400  
Washington, DC 20004

## APPLICATION FOR EMPLOYMENT ATTORNEY

PLEASE PRINT OR TYPE		PERSONAL DATA		ATTACH ADDITIONAL SHEETS AS NECESSARY		
Last Name		First		Middle		
Street Address			City		State	Zip Code
Telephone (Daytime)		Mailing Address if different from above			Email Address	
List all names you have used, including nicknames		Are you a citizen of the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you an alien authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a member of any bar? <input type="checkbox"/> Yes <input type="checkbox"/> No		State where Barred		Date of Admission	Bar Number	
List Other States where Admitted to the Bar and the Date of Admission				Work Availability Date		

REFERENCES		
Name	Email Address	Telephone No.

## LEGAL BACKGROUND

1. Please describe the general character of your current practice and any legal specialties you possess.

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2. Have you had primary responsibility for the handling of cases and other matters, contacting clients, and appearing in court during the course of your legal career? If so, please provide details.

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3. Have you ever been disciplined, cited, or otherwise sanctioned for a breach of ethics or unprofessional conduct by any court, administrative agency, bar association, disciplinary commission, or other professional group? If so, please give the particulars and how it was resolved.

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4. List all professional organizations of which you are a member and any non-attorney obligations you have in such groups (e.g. member of a board of directors).

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5. List all pending bar applications you currently have.

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6. State whether you are willing to waive into any other state or tribal bars or take a bar exam if needed for client work.

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### CERTIFICATION

By my signature, I hereby certify that the above information, and the information contained on the attachments to this application for employment, are true and correct and are made under the penalties of false swearing. I authorize Skenandore Wilson LLP, its employees and agents to verify this information.

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Signature of Applicant

\_\_\_\_\_  
Date