

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 did not apply 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, you must 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 below, I swear or affirm that the answers and statements on this application are complete, true and correct. I have not altered the wording on any question. Under penalties of perjury, I declare that I have read the foregoing application and that the statements contained herein 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