# CHANGE OF EMPLOYMENT (In-House Counsel)

\*\* For attorneys admitted to practice pursuant to <u>Rule</u> 1:27-2\*\*

APPLICANT ID	NUMBER: IHC:			
Name:				
Former Employer	Company Name			
	City	County	State	Zip Code
Ef	fective Date of Termina	ation of Employment:		
Current Employer	:: Company Name			
	Address			
	City	County	State	Zip Code
Ef	fective Date of New of	Employment:		
Current Business	Phone Number:			
E-mail Address: _				
Signature:			Date:	
Complete all 5 pa	ages and send original	ls to:		
Secretary, Board of Bar Examiners ATTN: In-House Counsel Change of Employment PO Box 973 Trenton, NJ 08625-0973 (USPS mail)		Secretary, Board of Bar Examiners ATTN: In-House Counsel Change of Employment Hughes Justice Complex, 8 <sup>th</sup> Floor, North Wing 25 Market Street Trenton, NJ 08625 (Commercial carrier deliveries)		

### STATE OF NEW JERSEY

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### **CERTIFICATION OF APPLICANT – CHANGE OF EMPLOYMENT**

I, \_\_\_\_\_, do hereby certify that I have previously applied for a limited license to practice as in-house counsel in New Jersey under <u>Rule</u> 1:27-2 and that:

1. I am a member of the Bar in good standing in the following jurisdictions:

2. I have (check appropriate box):

□ Not been the subject of attorney disciplinary action in any jurisdiction; or

 $\Box$  Been the subject of attorney disciplinary action in a jurisdiction, as follows

(append additional pages if necessary):

Jurisdiction	Date	Nature of Violation	Disposition
Jurisdiction	Date	Nature of Violation	Disposition

I am appending a copy of the complete record of all such actions to my Certified Statement of Applicant;

- 3. There are (check appropriate box):
  - □ No disciplinary actions pending against me in any jurisdiction; or
  - □ Disciplinary action(s) pending against me in a jurisdiction, as follows (append additional pages if necessary):

Jurisdiction	Date	Nature of Violation	Current Status
Jurisdiction	Date	Nature of Violation	Current Status
I am appending a copy Applicant;	of the con	nplete record of all such act	tions to my Certified Statement of
I am employed by and pe	rform legal	services in New Jersey solely f	òor:
Company Name			
Address			
City/State/Zip			

and;

4.

5. I will practice law according to <u>Rule</u> 1:27-2 as in-house counsel exclusively for the foregoing organization.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Signature of applicant

[Print Name of Applicant]

Dated: This \_\_\_\_\_\_, 20\_\_\_\_\_

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#### **CERTIFICATION OF EMPLOYER - CHANGE OF EMPLOYMENT**

Under <u>Rule</u> 1:27-2(a), an "In-House Counsel" is defined as a "lawyer who is employed in New Jersey for a corporation, a partnership, association, or other legal entity (taken together with its respective parents, subsidiaries, and affiliates) authorized to transact business in this State that is not itself engaged in the practice of law or the rendering of legal services outside such organization, whether for a fee or otherwise, and does not charge or collect a fee for the representation or advice other than to entities comprising such organization." All In-House Counsel who are not members of the New Jersey Bar are required to obtain a limited license under <u>Rule</u> 1:27-2. Pursuant to <u>Rule</u> 1:27-2(d), "in-house counsel shall not appear as Attorney of Record for his or her employer, its parent, subsidiary, or affiliated entities in any case or matter pending before the court of this State, except pursuant to <u>Rule</u> 1:21-1(c) and <u>Rule</u> 1:21-2."

*Among the requirements of <u>Rule</u> 1:27-2 is the following certification, which must be completed by "an officer, director or general counsel" of the applicant's employer.* 

I,	, hereby certify that I am an	
officer/director/general counsel (circle one) of		
	(Name of Business Entity)	
of ; that		is
(City, State)	(Name of Applicant-Employee)	-

employed as an in-house lawyer with our company and has been so employed since

(Month/Day/Year)

I further certify that the applicant is of good moral character and that the nature of the above applicant's employment conforms to the requirements of <u>Rule</u> 1:27-2.

I understand that this attorney is not permitted to appear as the attorney of record, may not file pleadings and may not appear in any Court in New Jersey without being admitted with a plenary license by taking the New Jersey Bar Examination, or on a per case pro hac vice basis, pursuant to <u>Rule</u> 1:21-2.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Signature of Officer/Director/General Counsel

[Print Name of Officer/Director/General Counsel]

Dated: This \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_\_