

New Jersey Application for Admission by Motion  
**REQUEST FOR PRE-APPROVAL OF PRIOR PRACTICE**  
(For use *prior* to submission of bar application)

**Instructions**

Complete the Request for Pre-approval of Prior Practice form and return original form(s)—through postal mail, as indicated below—**along with non-refundable \$50 fee** via check or money order, payable to *New Jersey Board of Bar Examiners*. No starter checks or foreign checks/money orders are accepted; and no cash (by mail).

**Via US Postal Service (Certified/First Class/  
Priority/Express Mail):**

New Jersey Board of Bar Examiners  
P.O. Box 973  
Trenton, NJ 08625-0973

**Overnight Deliveries via DHL, FedEx,  
UPS, etc.:**

New Jersey Board of Bar Examiners  
Richard J. Hughes Justice Complex  
25 W. Market Street  
8th Floor, North Wing  
Trenton, NJ 08611

**Requirements**

All applicants for admission by motion to the New Jersey Bar must have been in practice for a minimum of five of the prior seven years. An attorney shall be deemed to have been engaged in the practice of law for the purpose of admission on motion if, for five of the seven years immediately preceding the date of application, the attorney has been performing the following work for more than twenty (20) hours per week.

- 1) Providing legal counsel or legal services to clients or appearing before courts, administrative bodies, executive agencies, or other state or federal tribunals on behalf of clients, as a) a sole proprietor, or b) a partner, shareholder, member, or employee for, or under contract with, a professional corporation, partnership, limited liability partnership, or limited liability company;
- 2) Providing legal counsel or legal services or appearing before courts, administrative bodies, executive agencies, or other state or federal tribunals on behalf of a corporation, partnership, trust, or other entity while employed by that corporation, partnership, trust, or other entity;
- 3) Providing legal counsel or legal services or appearing before courts, administrative bodies, executive agencies, or other state or federal tribunals on behalf of the executive, legislative, or judicial departments, including the independent agencies thereof, for the federal government, a state or territory, or any political subdivision thereof;
- 4) Serving as a judge, magistrate, hearing examiner, administrative law judge, law clerk, or similar official on behalf of the federal government, a state or territory, or any political subdivision thereof;
- 5) Serving as a teacher at a law school accredited by the American Bar Association, including direct supervision of law students within a clinical program; and
- 6) Any combination of the above.

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USE ONE FORM FOR EACH EMPLOYMENT

Complete and submit this form in accordance with form instructions. A determination on acceptance of your prior practice for Admission by Motion will be made within 60 days.

**Name:** \_\_\_\_\_ **Phone number:** (\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
(Please print)

**Email address:** \_\_\_\_\_

**Bar Admittance** (Attach additional page, if needed): Jurisdiction (1)\_\_\_\_\_ (2)\_\_\_\_\_  
Admittance \_\_\_\_\_  
(MM//YY) (MM//YY)

**Employer:** \_\_\_\_\_

**Website Address:** \_\_\_\_\_

Employed from \_\_\_\_\_ to \_\_\_\_\_ Total # of Months \_\_\_\_\_  
(MM/DD/YYYY) (MM/DD/YYYY)

**Employer Address:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

**Hours per week:** \_\_\_\_\_

**Description of legal work performed** (Attach additional page, if needed):

- If you are/were working outside of your licensing jurisdiction, please specify explanation/justification for authorization to perform the legal work.
- Is/Was the employment Document Review? (Check one) ☐ Yes or ☐ No

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that the information provided above is accurate to the best of my knowledge. I understand that the New Jersey Board of Bar Examiners may contact the employer for verification purposes or other factors related to its assessment. I understand that I may submit this form if I am uncertain that my prior employment qualifies for admission by motion. If my prior practice is approved, I must upload my approval letter via my User Home Page for processing with my bar application.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Office Use Only:** Approved: \_\_\_\_/\_\_\_\_/\_\_\_\_ **Denied:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date Initials Date Initials