YAVAPAI-APACHE TRIBAL COURT

P.O. Box 3500, Camp Verde, Arizona 86322 (928) 567-1033, Fax (928) 567-1060

YAVAPAI-APACHE TRIBAL COURT/JUVENILE COURT PRACTITIONER APPLICATION AND INFORMATION SHEET

In order to be permitted to practice in the Yavapai-Apache Nation Tribal Court and/or the Yavapai-Apache Nation Juvenile Court, you must complete and submit this application and information sheet. Failure to submit the application or submission of an incomplete application will result in denial of your privilege to practice. Inaccurate or false information provided in the application will result in suspension or revocation of your privilege to practice and may subject you to contempt of court proceedings or criminal prosecution.

List your full legal name:

List any other name you use:

List your mailing address:

List your email address:

Name of Business or Law Firm:

List of Business or Law Firm mailing and physical address:

List your Business telephone and fax number:

List the name and location of the Tribe in which you are enrolled and your enrollment number (if applicable):

List your formal education beginning with High School and including dates of attendance and graduation:

School	Date of attendance	Degree
List your work experience Employer	e for the past ten (10) years: Dates of Employment	Position/Duties
Did you graduate from la school and year of gradua	w school?() Yes () No If yes, listing	st name and location of law
Have you completed any If yes, please provide the Name of School/Program		aw school? ()Yes () No
Dates of attendance/gradu	ation:	
Type/name of degree/cert	ificate:	
Listing of law-related cou	rses completed:	
	lifications to practice in the Yavapa completed and in-court and other r	-

Are you licensed in any state or U. S. territory to practice law? () Yes () No If yes, list all states and territories where you are licensed and the year you were first licensed in each:

Are you permitted to practice in any U. S., Federal or Military Court: () Yes () No If yes, list each court where you are permitted to practice and the year you were first admitted to practice there:

List the names and locations of all Tribal Courts where you are currently licensed to practice or have previously practiced:

Are you in good standing in every jurisdiction where you are permitted to practice? () Yes () No If no, list the name and location of the jurisdiction you are not in good standing and provide details regarding the reason for that status:

Has your privilege to practice ever been suspended or revoked in any jurisdiction? () Yes () No If yes, list the name and location of the jurisdiction, the date of suspension/revocation and details regarding the circumstances of the suspension/revocation:

Have you been convicted or found guilty of any felony or misdemeanor criminal offense within the last twelve months? () Yes () No If yes, list the jurisdiction where convicted, the date of conviction, the case number and the offense for which you were convicted (including misdemeanor traffic offense):

Please provide three professional references (Name, address, telephone number): 1.

2.			
3.			

I hereby certify as a prospective officer of the Yavapai-Apache Nation Tribal Court that the information provided herein is true and complete as of the date written below.

Applicant's Signature	Date
Application Fee of \$150.00 enclosed:	 Money Order Cashier's Check Corporate Check

NOTE: You will be required to submit a Practitioner Renewal Application and renewal fee of \$150 each year on or before the anniversary date your original application. You are responsible for notifying the Yavapai-Apache Nation Tribal Court of any changes to the information you provide herein, which arise before your renewal application is due.

THIS SECTION FOR COURT USE ONLY

Admission Granted:_____

Admission Denied:_____

Application Fee Waived

As: () Attorney () Lay Advocate

DATE

Chief Judge, Yavapai-Apache Nation