In the Matter of the Application of  
Jane Smith Doe  
Candidate for Admission to the Practice of Law in Virginia  

EXPLANATION AND INSTRUCTIONS  

Before being issued a license to practice law in Virginia, each applicant is required by statute to produce to the Virginia Board of Bar Examiners evidence sufficient to satisfy the Board that the applicant is a person of honest demeanor and good moral character and possesses the requisite fitness to perform the obligations and responsibilities of a practicing attorney at law. Va. Code Ann. § 54.1-3925.1. The standards for making such evaluation are set forth in the Board’s Rules and Supreme Court Regulations. Completion of the Character & Fitness Questionnaire is the first step in this process.  

You must answer each question on this Questionnaire fully and truthfully. Any omission, untruthful answer, or incomplete answer may result in your being denied the privilege of taking the bar examination and/or practicing law in Virginia. If you have any doubts about whether any matter should be reported on this Questionnaire, YOU SHOULD report it. Any advice you seek or receive does not absolve you of responsibility for your response. If an omission is deemed material, such omission may result in the denial of licensure.  

If you are not sure of dates, times, places, or other information requested, it is your responsibility to consult the court, governmental agency, or other entity or person involved to obtain the accurate and complete information.  

If the space provided for any answer is inadequate, complete your answer on a separate sheet, referencing the question to which it relates. Affix your signature to each additional sheet you submit with the Questionnaire. Your answers to the completed Questionnaire must be verified before a Notary Public.  

Until you are licensed, admitted and registered as a member of the Virginia State Bar, you have a continuing duty to report immediately the following, in writing, to the Virginia Board of Bar Examiners: any change in your personal, educational or professional status that may affect your standing relative to your character and fitness to practice law, including anything that would modify any of the responses on this Questionnaire or subsequent updates.  

An original Questionnaire with required attachments, bearing your original signature under oath or affirmation, must be submitted to the Secretary of the Virginia Board of Bar Examiners along with the appropriate fee, in accordance with the fee schedule currently in effect. An Application for Examination, Admission Without Examination, the Law Reader Program, Military Legal Assistance Attorney, or Military Spouse Provisional Admission must be filed simultaneously with this Character & Fitness Questionnaire. You should keep a photocopy of your completed Character & Fitness Questionnaire for your personal records.  

• The filing deadline for the February Bar Exam is December 15 and for the July Bar Exam is May 10. Applications for Examination and Character & Fitness Questionnaires should be filed no more than 90 days prior to the filing deadline, but must be filed by the statutory filing deadline in accordance with § 54.1-3925.1 of the Code of Virginia.  

• I understand that this Questionnaire is NOT the application to take the Virginia Bar Examination and that I must file simultaneously an Application for Examination on the form prescribed by the Board of Bar Examiners, by the statutory filing deadline, IN ADDITION TO this Character & Fitness Questionnaire. ________ (Initial Here)  

Your completed Application, Questionnaire, fee, and all required attachments should be filed with:  
Secretary, Virginia Board of Bar Examiners  
2201 West Broad Street, Suite 101 – Richmond, Virginia 23220-2022
Section 1 – Personal Information

1.1 Full legal name
Ms. Jane Smith Doe

Title First name Middle name Last name Suffix

YES 1.2 Have you ever used or been known by any other name (other than a nickname), including but not limited to a legal name change, maiden name or former married name?

Name Dates Reason for prior name
Jane Ann Smith 01/01/85 - 12/31/05 Marriage

1.3 Last 4 digits of social security number 9999

1.4 Date of birth January 1, 1985

1.5 Place of birth Richmond, Virginia

YES 1.6 Were you born in a foreign country? (A) Please state at what age you came to the USA. Age 15

Section 2 – Citizenship

NO 2.1 Are you a citizen of the United States?

YES 2.2 Do you reside legally in the United States according to the United States Immigration Laws and Regulations by holding a valid Visa?

(A) I will complete and submit the “Affidavit of Immigration Status”.

Section 3 – Mailing Address

3.1 Provide your current mailing address, including your telephone number.

Street 123 Happy Street

APT 155

City Richmond

State VA ZIP 23220

Daytime phone (888) 849-3928

Email address janesdoe@gmail.com

Date of birth January 1, 1985

From month/year Feb 2012

YES 3.2 Do you reside at your current mailing address?

3.3 Name and daytime telephone number of a person who does not reside with you, but could assist the Board in contacting you.

Name Relationship Phone
Mary Smith Mom (804) 555-2147
YES 3.4 Since your 18th birthday or for the past ten (10) years, whichever period is shorter, have you lived at any address other than your current mailing address? List all addresses (permanent and temporary) where you have lived since your 18th birthday or for the past ten (10) years, whichever period is shorter. For each residence, list the exact address, together with the month and year of the beginning and ending dates.

1. From month/year Jan 2014 To month/year Mar 2014
   Street 123 Main
   UNIT 15
   City Richmond
   County Richmond City
   State VA
   ZIP 23333

2. From month/year Aug 2003 To month/year Mar 2007
   Street 999 Brooklyn Park Boulevard
   APT 78
   City Brooklyn
   County Manchester
   State NY
   ZIP 11205

3. From month/year Feb 1999 To month/year Jun 2002
   Foreign address 10 Marina Boulevard
   #34-02 Marina Bay Financial Centre
   Singapore 018983
   Singapore

Section 4 – Marital Status

4.1 Indicate your current marital status. Married
   (A) State the date of your marriage and your spouse's full name (include spouse's maiden name, if applicable).
   Date of marriage August 8, 2000
   Spouse's full name Mary Alice Smith (Olsen)

YES 4.2 Have you had a marriage terminated by divorce, annulment, dissolution, or any other legal termination or separation?
   (A) Please provide the title and number of the case, the name and address of the court granting the decree, date of the decree, grounds for termination, and name and address of your legal counsel.

1. Jane Smith Doe v. James Alan Doe
   Case No. 38292
   Circuit Court of City of Richmond, John Marshall Courts Bldg, Richmond, VA 23219
   May 15, 2013
   Irreconcilable Differences
   No Legal Counsel

YES 4.3 Have you ever been or are you currently under any obligation to pay alimony?
   (A) Please state your compliance with such support payments and list the name and last known address of your former spouse to whom support is/was to be paid.

1. Current with payments
   James Alan Doe
   123 First Drive
   Richmond, VA 23232
YES 4.4 Have you ever been or are you currently under any obligation to pay child support?

(A) Please state your compliance with such child support payments and list the name and last known address of your former spouse or the custodial parent of your child(ren) to whom child support is/was to be paid.

1. All child support payments are current.

   James Doe
   4545 Dove Street
   Richmond, VA  23226

YES 4.5 Have you had any post-judgment actions filed in any domestic court, including but not limited to motions, citations in contempt, child custody actions, or motions filed in any jurisdiction by any person or agency?

(A) Please provide all post-judgment actions: list the title, case number, date, court name and address, your legal counsel’s name and address, and disposition or current status.

John Doe v. Jane Doe
Case #JD2321
Juvenile and Domestic Relations Court, City of Richmond, John Marshall Courts Bldg, Richmond, VA 23219

No Legal Counsel
I was ordered to pay child support and court proceedings have been closed.

Section 5 – Education

YES 5.1 Have you attended any colleges, universities, trade schools, or other post-high school educational facilities, other than law school?

List all colleges, universities, trade schools, or other post-high school educational facilities (except law school) you have attended. Give the name and complete address of the registrar’s office for each facility (including ZIP Code), the period of attendance (from and to dates), degree type and date received.

1. School name: Brooklyn University
   Street: 16 Registrar Drive
   Street 2: Suite 202
   City: Brooklyn
   From month/year: Sep 2003
   To month/year: May 2008
   Degree type received: Bachelor of Science
   Degree date: May 5, 2008

YES 5.2 Have you attended law school?

List all law schools you have attended. Enter the name and complete registrar’s office address of the law school (including ZIP Code), the period of attendance (from and to dates), and degree type and date received.

1. School name: Brooklyn Law School
   Street: One Boerum Place
   City: Brooklyn
   From month/year: Aug 2008
   To month/year: Jan 2011
   Degree type received: Juris Doctorate
   Degree date: January 15, 2011

NO 5.3 Have you participated in any jurisdiction's Law Reader Program, excluding Virginia?
NO 5.4 Are you applying for or have you completed the Law Reader Program?

Section 6 – Academic Conduct

YES 6.1 Have you ever been academically, administratively or otherwise disciplined, placed on probation, suspended, expelled, requested to terminate your enrollment, or allowed to resign in lieu of disciplinary action at any college, university, law school, trade school or any other post-high school educational facility?

(A) Please give the name and address of the institution, a description of the alleged violation and any action by the institution, the date of the action and a full explanation of the reasons for such action.

I was on academic suspension for one semester while in college due to poor grades.
Brooklyn University
16 Registrar Drive
Suite 202
Brooklyn, NY

YES 6.2 Have you ever been charged with violating the honor code of any educational facility (regardless of the disposition of the charge)?

(A) Please give the name and address of the institution, a description of the alleged violation and any action by the institution, the date of the action, and a full explanation of the reasons for such action.

Honor Code in school for plagiarism. I received a "0" zero and placed on academic probation for one year.
Brooklyn Law School
One Boerum Place
Brooklyn, NY

YES 6.3 Have you ever been accused or investigated, or are you currently under investigation, for improper conduct or alleged cheating on a standardized test?

(A) Please give the name and address of the entity administering the test, the test type and administration date, a description of the alleged violation and any action taken, the date of the action, and a full explanation of the reasons for such action.

LSAT - Brooklyn, NY. I was accused of writing after time was called. I had to retake the LSAT. I took the test again in December 2010 without incident.

Section 7 – Military Service

NO 7.1 Have you ever been rejected for service in any branch of the Armed Forces of the United States?

YES 7.2 Are you currently or have you ever been a member of the Armed Forces of the United States, its Reserve components, or the National Guard?
7.3 Please indicate all the branches of the Armed Forces you are serving or have served.

1.

For your current service, please indicate type of service, dates of service, rank, current duty station, and commanding officer's name and phone number.

- **Type of service**: National Guard - Army
- **Dates of service**: January 1, 1991 to Present
- **Rank**: E-7
- **Current duty station**: Ft. Lee
- **Street**: 123 Main Street
- **City**: Petersburg
- **State**: VA
- **ZIP**: 23833
- **Phone number**: (804) 555-1212
- **Commanding officer**: Col. Potter
- **Commanding officer's phone**: (504) 555-1211

ATTACH: Statement of service signed by an official of your unit or headquarters which identifies your current active duty.

2.

For your prior service, please indicate type of service, dates of service, and rank.

- **Type of service**: National Guard - Army
- **Dates of service**: June 10, 2006 to February 15, 2009
- **Rank**: E4

(A) Please indicate your discharge status:

I received an Honorable Discharge

ATTACH: Copy of the NGB Form 22 (Report of Separation and Record of Service), or NGB Form 23 (Retirement Points Accounting), or it’s equivalent.

NO 7.4 While serving in the Armed Forces of the United States, were you ever a defendant in any court-martial?
Section 8 – Employment/Unemployment History

8.1 Employment Details – Detailed information for each period of employment/unemployment is required.

All information must be accurate and complete or your character and fitness investigation will be delayed.

List your employment (to include self-employment, internships, volunteer work, academic credit and unemployment) going back ten (10) years, or since the age of 18, whichever is less. All periods of time must be accounted for.

- For each employment, self-employment, internship, volunteer work or academic credit you must provide the following:
  - Beginning and ending dates (month/year).
  - The name of each employer, business, association or enterprise, and your position.
  - Employer’s current mailing address (including ZIP Codes, phone and fax numbers).
  - Department and/or Supervisor
  - Reason for leaving

If you were self-employed or your employer is no longer in business, provide the following:

- A verifying reference (i.e., supervisor, owner, client, etc.) (not a relative) who can substantiate your employment or self-employment information.
- Verifying reference’s current mailing address (including ZIP Codes, phone and fax numbers).
- How you know the verifying reference (i.e., co-worker, boss, client, owner, etc.).
- How long you have known the verifying reference.

For each period of unemployment you must provide the following:

- Beginning and ending dates (month/year) of each period of unemployment.
- Reason for unemployment, (i.e., in school, studying for bar exam, etc.).

All information must be current and accurate.

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1. Employment type: Internship
   Employer: Jones, Jones & Jones
   Street: 123 Main Street
   City: Richmond
   State: VI
   ZIP: 23220
   Phone number: (804) 555-1212
   Fax number: (804) 555-1213
   Position: Associate
   Supervisor or Department: Mr. Jones
   Additional comments/information: Additional Comments

   From month/year: Jun 2012
   To month/year: Present
   Is employer still in business? YES

2. Employment type: Unemployed
   Reason for unemployment: In School
   From month/year: Jan 2003
   To month/year: Jun 2012

   YES 8.2 Have you ever been terminated by any employer?
   (A) Please identify the employer's name, address, date of termination, and reason for termination.

   Was terminated from employment at Hills Department Store, 100 State Street, Richmond, VA while in high school (summer of 2001) due to my car breaking down and not being able to arrive on time.
Have you ever been asked to resign or been given the choice of resigning in lieu of being terminated by any employer?

(A) Please identify the employer's name, address, date of resignation, and reason you resigned or were asked to resign.

ABC Book Store 8 Main Street Norfolk, VA 23456
I was asked to resign in lieu of termination for taking unauthorized leave.

Section 9 – References

9.1 Please list below three non-relative character references, residing in the United States, who know you well. Your character references can be professors, co-workers/employers (not previously listed as a reference in the employment section), neighbors or friends. Please do not list classmates.

Name: Officer David Smith
Occupation: Policeman
Street: 123 Main Street
City: Richmond
State: VA
ZIP: 23220
Phone: (804) 555-1212
How long known: 10 years

Name: Professor Plum
Occupation: Professor
Street: Brooklyn University, 16 Registrar Drive
Street 2: Suite 500
City: Brooklyn
State: NY
ZIP: 11205
Phone: (804) 555-2121
How long known: 8

Name: Judge Hope Carr
Occupation: Judge
Street: 100 Monumental Drive
City: Brooklyn
State: NY
ZIP: 11208
Phone: (804) 555-4321
How long known: 5

Section 10 – Bar Exam Information

YES 10.1 As a law student, have you ever applied to be eligible to participate in clinical education or third year practice program(s)?

(A) Please list the jurisdiction(s) and date (month/year).

New York on Jan 2011

YES 10.2 Some states require law students to pre-register to take their bar exam and/or to seek character and fitness certification. Have you ever registered as a law student or sought character and fitness certification as a law student?

(A) Please list the jurisdiction(s) and date (month/year) of such submission or registration.

New York on Apr 1971
YES 10.3 Are you currently or have you ever been admitted or licensed to practice law in any jurisdiction (i.e., any state or territory of the United States, or the District of Columbia)? List ALL jurisdictions where you are or have ever been admitted.

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Application date</th>
<th>Application type</th>
<th>Admission status</th>
<th>Admission date</th>
<th>Proof of good character required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>New York</td>
<td>Jan 2011</td>
<td>Exam</td>
<td>Active</td>
<td>June 21, 2011</td>
<td>YES</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>Jan 2011</td>
<td>Exam</td>
<td>Inactive</td>
<td>June 15, 2011</td>
<td>YES</td>
</tr>
</tbody>
</table>

YES 10.4 Have you ever applied for admission to practice law in any jurisdiction (including any previous Virginia applications) where the outcome resulted in your NOT being admitted (i.e., failed, denied, withdrawn, etc.) to the bar of such jurisdiction (even if you were later admitted)? List the dates, type and status of each and every application which resulted in your not being admitted.

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Application date</th>
<th>Application type</th>
<th>Application status</th>
<th>Proof of good character required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Jersey</td>
<td>Feb 2014</td>
<td>Exam</td>
<td>Pass - Never Admitted*</td>
<td>YES</td>
</tr>
</tbody>
</table>

Explanation for Pass – Never Admitted* application status: Failed to resolve C&F issues.

YES 10.5 Have you applied to practice law in any jurisdiction where the current status of your application is pending (i.e., application status unknown at this time)? List the jurisdiction, date, and type of each and every pending application.

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Application date</th>
<th>Application type</th>
<th>Application status</th>
<th>Proof of good character required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ohio</td>
<td>Mar 2014</td>
<td>Other*</td>
<td></td>
<td>YES</td>
</tr>
</tbody>
</table>

Explanation for Other* application type: Attorney at large

YES 10.6 Have you ever been denied permission to take the bar examination in any jurisdiction? (A) Please provide the date, jurisdiction, decision or recommendation (including reasons cited), and any and all other pertinent information.

Application denied in 2014 to North Carolina for submitting an incomplete package.

YES 10.7 Have you ever been denied admission to the practice of law in any jurisdiction, other than for failure to pass the bar examination? This should include any adverse decisions, negative recommendations, or any contingencies concerning licensure, whether final or otherwise. (A) Please provide the date, jurisdiction, decision or recommendation (including reasons cited), and any and all other pertinent information.

DC Bar 2015. I was denied for not responding to the inquiries from the staff.
YES 10.8 Have you ever submitted an application, applied for, or held a license or certificate (e.g., CPA, real estate broker, physician, patent practitioner, etc.) which required proof of good character, other than the applications for bar admissions?

For each license or certificate you have ever applied for, other than the bar admissions, identify the type of license or certificate and state the date it was granted, the name and complete current mailing address of the authority issuing it, whether the license or certificate is active, inactive, pending, denied or revoked, and whether you have been reprimanded, censured, or otherwise disciplined as the holder of the license or certificate.

1. **License/Certificate type**: Real Estate License
   **License/Certificate number**: 148415GMD
   **Issuing date**: July 15, 2014
   **Current status**: Active
   **Issuing authority**: Century 21
   **Complete mailing address - Street**: 1234 Main Street Suite 222
   **City**: Richmond
   **State**: VA
   **ZIP**: 23222
   **Have any disciplinary proceedings been instituted against you by Century 21?**: NO

Section 11 – Professional Discipline

YES 11.1 Have you ever been suspended, censured, reprimanded, disqualified or otherwise disciplined as a member of any profession?

(A) Please provide the facts and circumstances leading to the action, the professional agency and address, date, case or file number, and current status.

2013 Mr. Lodge, a client, filed a complaint against my real estate license for not responding to his calls. My license was suspended for six months.

YES 11.2 Have you ever been removed from any office, public or private, because of conduct reflecting upon your character, or have any charges been made or filed, or proceedings instituted against you because of conduct reflecting on your character?

(A) Please provide the facts and circumstances leading to the action, the professional agency and address, date, case or file number, and current status.

In 2012, two of my neighbors filed charges against me for Aiding and Abetting a Crime. I was the President of our Neighborhood Watch Committee and one night while I was doing my rounds, I witnessed a break in that I failed to report or acknowledge. I failed to do so because upon closer look that night, I realized that it was my teenage brother who had been battling a drug addiction. When the neighbors found out all of this, they filed charges.

Orchard Courthouse
123 Rose Lane
Orchard, IN 12345
August 2012
Case number unknown
Found not guilty
YES 11.3 Have there ever been or are there now pending any charges, complaints or grievances (formal or informal) concerning your conduct as a member of any profession or as a holder of public office?

(A) Please provide the facts and circumstances leading to the action, the professional agency and address, date, case or file number, and current status.

Mr. Baxter, complainant, alleged that I failed to advise his client of two hearings and neglected to prepare adequately for the case.

June 2012
New York
General neglect
Disposition: staff dismissal in-house

YES 11.4 To your knowledge, has your conduct ever been questioned with reference to the unauthorized practice of law?

(A) Please set forth all facts and circumstances.

2012 - I was investigated for UPL in New Jersey. The case was dropped.

YES 11.5 To your knowledge, have you ever been employed by or otherwise connected with any person, firm or corporation whose conduct was questioned on the subject of unauthorized practice of law while you were so employed or connected?

(A) Please set forth all facts and circumstances.

Jones, Jones & Jones was investigated for unauthorized practice of law in the District of Columbia. Allegations were unfounded and no UPL was found to have taken place.

Section 12 – Driving Records/Motor Vehicle Reports

YES 12.1 Have you ever held a license to operate a motor vehicle in any state?

List all state(s) where you have ever held a license to operate a motor vehicle within the last five (5) years.

<table>
<thead>
<tr>
<th>State</th>
<th>Year acquired</th>
<th>Status</th>
<th>License number</th>
<th>Year relinquished</th>
</tr>
</thead>
<tbody>
<tr>
<td>VA</td>
<td>2011</td>
<td>Active</td>
<td>T12345678</td>
<td></td>
</tr>
<tr>
<td>NH</td>
<td>2003</td>
<td>Surrendered</td>
<td>789456123</td>
<td>2011</td>
</tr>
<tr>
<td>NJ</td>
<td>2002</td>
<td>Surrendered</td>
<td>456789123</td>
<td>2003</td>
</tr>
<tr>
<td>NM</td>
<td>2001</td>
<td>Surrendered</td>
<td>123456789</td>
<td>2002</td>
</tr>
<tr>
<td>MN</td>
<td>1968</td>
<td>Expired</td>
<td></td>
<td>1977</td>
</tr>
</tbody>
</table>

ATTACH a current driving record (dated no more than 60 days prior to submitting this CFQ) from each state listed.

The driving record printout must include your name and personal/verifying information.
Section 13 – Legal Proceedings (Civil, Criminal, and Traffic Violations)

Legal Proceedings - The following questions must be answered fully, regardless of bond forfeitures, dismissals or similar termination, including charges that were not prosecuted. Nondisclosure of a criminal charge is allowable only when the charge has been expunged or sealed in accordance with the applicable state law.

Expunged and Sealed Offenses: While expunged or sealed offenses, arrests, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, or citation has, in fact, been expunged or sealed. It is highly recommended that you obtain a copy of the Court Order expunging or sealing the record in question. Failure to reveal an offense, arrest, or citation that has not, in fact, been expunged or sealed, raises questions related to truthfulness in addition to questions regarding the offense itself.

YES 13.1 Are you presently or have you ever been a party to or otherwise involved (except as a witness) in any civil or administrative action or legal proceeding?

1. Civil

<table>
<thead>
<tr>
<th>Description of allegation</th>
<th>I did not pay my rent for 6 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plaintiff name</td>
<td>Hometown Apartments</td>
</tr>
<tr>
<td>Plaintiff attorney</td>
<td>Alex Forte</td>
</tr>
<tr>
<td>Defendant name</td>
<td>Robert Smith</td>
</tr>
<tr>
<td>Defendant attorney</td>
<td>Frank Race</td>
</tr>
<tr>
<td>Name of court</td>
<td>Richmond City Court</td>
</tr>
<tr>
<td>Court address</td>
<td>123 Main Street</td>
</tr>
<tr>
<td>City</td>
<td>Richmond</td>
</tr>
<tr>
<td>State</td>
<td>WI</td>
</tr>
<tr>
<td>ZIP</td>
<td>23234</td>
</tr>
<tr>
<td>Case number</td>
<td>123-583-990</td>
</tr>
<tr>
<td>Case type</td>
<td>Non-payment of rent</td>
</tr>
<tr>
<td>File date</td>
<td>6-10-2014</td>
</tr>
<tr>
<td>Final court date</td>
<td>6-15-2014</td>
</tr>
<tr>
<td>Final disposition</td>
<td>Ordered to pay the rent and move out.</td>
</tr>
</tbody>
</table>

YES 13.2 Are you presently or have you ever been a party to or otherwise involved (except as a witness) in any action or legal proceeding in a juvenile court?

1. Juvenile

<table>
<thead>
<tr>
<th>Date of Incident or time period</th>
<th>April (Unknown), 2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offense initially charged</td>
<td>Trespassing, misdemeanor</td>
</tr>
<tr>
<td>Facts and circumstances, in detail, leading up to charge</td>
<td>Entered school at night</td>
</tr>
<tr>
<td>Location of offense (City)</td>
<td>Richmond</td>
</tr>
<tr>
<td>State</td>
<td>VA</td>
</tr>
<tr>
<td>Did you appear in court?</td>
<td>NO</td>
</tr>
</tbody>
</table>

No Court Appearance

| Disposition | Guilty, paid the fine |
| Paid to | Richmond |
| Amount paid | 100 |
| Date Paid | 5/5/2007 |
YES

13.3 Are you presently or have you ever been a party to or otherwise involved (except as a witness) in a criminal or quasi-criminal action or legal proceeding (whether involving a felony, misdemeanor, minor misdemeanor, or any traffic offense or infraction, including charges which did not require your appearance in court)?

1. Criminal/Quasi-Criminal/Traffic

<table>
<thead>
<tr>
<th>Date of Incident or time period</th>
<th>June 6, 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Felony?</td>
<td>NO</td>
</tr>
<tr>
<td>Speeding</td>
<td></td>
</tr>
<tr>
<td>Facts and circumstances, in detail, leading up to charge</td>
<td>Speeding on Interstate 95 coming to New York from Richmond. Was charged with going 85 in a 70 MPH zone</td>
</tr>
<tr>
<td>Location of offense (City)</td>
<td>Baltimore</td>
</tr>
<tr>
<td>Did you appear in court?</td>
<td>NO</td>
</tr>
<tr>
<td><strong>No Court Appearance</strong></td>
<td></td>
</tr>
<tr>
<td>Disposition</td>
<td>Paid fine</td>
</tr>
<tr>
<td>Paid to</td>
<td>Baltimore County Court</td>
</tr>
<tr>
<td>Amount paid</td>
<td>$165</td>
</tr>
<tr>
<td>Date Paid</td>
<td>August 2010</td>
</tr>
</tbody>
</table>

2. Criminal/Quasi-Criminal/Traffic

<table>
<thead>
<tr>
<th>Date of Incident or time period</th>
<th>March (Unknown), 2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Felony documentation required</td>
<td></td>
</tr>
<tr>
<td>Offense initially charged</td>
<td></td>
</tr>
<tr>
<td>Facts and circumstances, in detail, leading up to charge</td>
<td>Possession of Marijuana with Intent to Distribute</td>
</tr>
<tr>
<td>Location of offense (City)</td>
<td>New York City</td>
</tr>
<tr>
<td>Did you appear in court?</td>
<td>YES</td>
</tr>
<tr>
<td><strong>Court Appearance</strong></td>
<td></td>
</tr>
<tr>
<td>Your name at time of charges</td>
<td>Jane Ann Smith</td>
</tr>
<tr>
<td>First court appearance date</td>
<td>July 22, 2008</td>
</tr>
<tr>
<td>Name of court</td>
<td>Brooklyn Circuit Court</td>
</tr>
<tr>
<td>Division of court</td>
<td>Division I</td>
</tr>
<tr>
<td>Court address</td>
<td>1900 Courts Drive</td>
</tr>
<tr>
<td>City</td>
<td>Brooklyn</td>
</tr>
<tr>
<td>Docket number</td>
<td>CD 43219</td>
</tr>
<tr>
<td>Plea</td>
<td>Not Guilty</td>
</tr>
<tr>
<td>Disposition</td>
<td>Nollo Prossed</td>
</tr>
<tr>
<td>Sentence</td>
<td>No Sentence - all charges dropped because the judge ruled that the search and seizure was illegal</td>
</tr>
</tbody>
</table>

Section 14 – Additional Legal Proceedings

YES 14.1 Other than provided in Section 13 - Legal Proceedings (Civil and Criminal), have you ever been summoned for a violation of any other statute, regulation or ordinance?

(A) Please set forth all facts and circumstances.

2009, Yes: I failed to renew my Real Estate License, but was still actively in business trying to sell. Suspended for 1 month and required to attend seminar.
YES 14.2 Do you have any outstanding or unpaid fines, court costs, or tickets, including those for traffic or past-due parking violations?
(A) Please provide type of fine, location of violation and set forth all facts and circumstances.

I have disputed unpaid parking tickets in New York. I am working on resolving this issue with New York City

YES 14.3 Have you ever been removed, resigned, or asked to resign as a guardian, executor, administrator, trustee, or other fiduciary?
(A) Please set forth all facts and circumstances.

Yes, in 2009, I was executor of an estate for a client of mine who passed away and I was removed of that for the above offense (fail to renew real estate license)

YES 14.4 Have you ever been granted immunity from prosecution?
(A) Please set forth all facts and circumstances.

I was granted immunity during the 2012 charges against me (Aiding and Abetting) for disclosing the whereabouts of my teenage brother’s drug dealers.

YES 14.5 Have you ever been cited or arrested for contempt of court for any reason, including, but not limited to, failure to appear as a witness or answer a subpoena or jury summons?
(A) Please set forth all facts and circumstances.

I was cited for contempt of court because the date on my subpoena was inaccurate. Once I showed the court my subpoena, they dropped the contempt of court charge.

YES 14.6 Has your driver’s license ever been revoked or suspended within the last ten (10) years?
(A) Please provide the state(s) and date(s) of each suspension or revocation and set forth all facts and circumstances.

Failed to provide proof of insurance to the DMV and they suspended my license until I provided such proof

Section 15 – Credit Information

ALL APPLICANTS: You must attach ONE (1) current credit report meeting the following criteria:
Obtained from Experian, Equifax OR TransUnion ONLY
Dated within sixty (60) days of the date of filing this Questionnaire
Credit summary or profiles are NOT acceptable. A FULL credit report is required.

YES 15.1 Within the last seven years, have you had a credit card revoked?
(A) Please set forth a detailed explanation of the facts. List the creditor's name, current address and your account number. If any court or agency proceedings were involved, state the names, case numbers and dates of all court or agency proceedings, the dispositions made thereof, the names and addresses of the courts or agencies in which the records may be found, and the name and address of your legal counsel in each proceeding(s). Where applicable, a copy of the court order should be submitted.

credit card revoked
Macy's Acct# 12345
NY Avenue
Macy's revoked card due to inactivity
YES 15.2 Currently, do you have any debts that are more than 90 days **past-due**, including student loans? This should include current claims, settlement offers, payment plans in effect with any creditor or taxing authority (local, state, or federal).

Provide the following details for each delinquent debt: Creditor's name, address, account number, current balance, past due amount, reason for delinquency and steps being taken to resolve the delinquency.

<table>
<thead>
<tr>
<th>1.</th>
<th>Creditor's name</th>
<th>American Express</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Complete mailing address - Street</td>
<td>PO Box 98765</td>
</tr>
<tr>
<td></td>
<td>City</td>
<td>El Paso</td>
</tr>
<tr>
<td></td>
<td>State</td>
<td>TX</td>
</tr>
<tr>
<td></td>
<td>ZIP</td>
<td>79998</td>
</tr>
<tr>
<td></td>
<td>Account number</td>
<td>123456789</td>
</tr>
<tr>
<td></td>
<td>Current balance</td>
<td>$6,278.94</td>
</tr>
<tr>
<td></td>
<td>Past due amount</td>
<td>$278.00</td>
</tr>
<tr>
<td></td>
<td>Reason for delinquency</td>
<td>I have contacted American Express and they have agreed to freeze all interest until my payments are current</td>
</tr>
<tr>
<td></td>
<td>Steps being taken to resolve</td>
<td>I was laid off from my last job and was unemployed for a few months, which caused me to fall behind on payments.</td>
</tr>
</tbody>
</table>

NO 15.3 Have you any unsatisfied judgments against you?

YES 15.4 Have you ever filed or been the subject of a petition in bankruptcy?

(A) Please attach a copy of your bankruptcy petition, including a copy of all schedules and discharge of debt.

Provide in full detail all facts and circumstances leading to your insolvency.

2010, Chapter 7 Bankruptcy, Richmond Circuit Court

My ex-husband and I got into financial difficulty while I was attending law school and with the birth of our first child. The expenses of everyday life became unbearable and we had to file bankruptcy to protect us from the outrageous amount of our medical bills because we did not have medical insurance.


YES 15.5 Have you ever been the subject of a trusteeship, receivership, wage attachment, or garnishment proceeding?

(A) Please explain in full detail all facts and circumstances regarding the trusteeship, receivership, wage attachment or garnishment proceedings.

Prior to the 2010 filing of Chapter 7 Bankruptcy, Bon Secours was garnishing my paycheck for outstanding medical bills.
YES  15.6  Have you ever been engaged in business as an owner or been a director, an officer, a partner, a more than five-percent shareholder, or a joint venturer in any business enterprise?

(A)  List each business or enterprise, full address and dates of operation.

I was a partner and half owner of the real estate company I worked at, Bridges & Sons Realty, from 2006-2009.

YES  (B)  Have any of your businesses or enterprises ever been insolvent or filed for protection from its creditors?

Please explain in full detail all facts and circumstances leading to the business or enterprise insolvency.

Bridges & Sons Realty filed Chapter 13 in 2010 to have an opportunity to reorganize. We later closed the doors in 2016.

YES  (C)  Have any of your businesses or enterprises ever been involved in litigation?

Please give a detailed explanation of all litigation, i.e., case name, case number, court, description of the allegations, attorney’s name and address representing the business.

My company, Bridges & Sons Realty, was involved in litigation in 2009 due to my failing to renew my license but still "practicing"

YES  15.7  Have you failed to timely file any state or federal tax return?

Please provide the following details for each delinquent tax filing.

1.  Type of filing  State  Tax year not filed  2014
    Taxing authority  Treasurer of Chesterfield
    Street  123 Main Street
    City  Richmond  State  VA  ZIP  23232
    Return filed?  YES
    Filing month  Feb  Filing year  2016

Section 16 – Student Loans

YES  16.1  Have you ever obtained a Student Loan?

Provide details for all student loans you have ever obtained. Include all student loans, whether guaranteed or not, from whatever source, whether paid in full, in repayment or not yet in repayment. Student loan information may be grouped and the total amount listed if the lender and account numbers are identical or if your loans have been consolidated. Note: Documentation regarding your student loans from other sources will not be accepted; you must provide the information in the format provided below.

1.  Repayment status  In Repayment
    Creditor's name  US Student Loan Lender
    Complete mailing address - Street  100 North Avenue
    City  Washington  State  DC  ZIP  20009
    Date began/to begin payment  Feb 2011
    Account number  9999999  Original loan amount  $45,000.00
YES 16.2 Have you ever defaulted on any student loan? (Answer yes even if the debt is now satisfied)

(A) Please give the (1) name and current address of the creditor, (2) the loan account number, (3) the amount owed, and, (4) if still in default, what steps have been taken to bring the account current. Attach a current copy of any documentation from your lender or servicer showing the status of each defaulted student loan.

In 2009, previous to filing bankruptcy, I defaulted on my Sallie Mae loans. Loans could not be discharged, but Sallie Mae let me make payments and reversed the default status.

Sallie Mae
701 Penn Avenue
Washington, DC 20002

YES 16.3 Has a judgment ever been entered against you in favor of a student loan guarantor or lender?

(A) Please list the names and current addresses of the holders, furnish certified copies of such judgments and, if satisfied, satisfaction of judgments.

US Student Loan Lender
Washington, DC
Entered a judgement against me in 2011 with Henrico County District Court (CV11-12345). Judgement paid.

Section 17 – Security Clearance

YES 17.1 To your knowledge, have you ever been denied a security clearance or has a security clearance previously granted to you ever been revoked?

(A) Please explain fully, including the name of the issuing agency, the security designation and the particulars of the revocation or denial of the clearance.

2008: Applied to intern with the U.S. House of Representatives, but my security clearance was denied due to my 2006 misdemeanor trespassing charge.
Section 18 – Health Matters

The following inquiries address recent health matters. The purpose of such inquiries is to determine the current fitness of an applicant to practice law. The mere fact of treatment for health problems is not, in itself, a basis on which an applicant is denied admission in Virginia, and the Board of Bar Examiners regularly licenses individuals who have demonstrated personal responsibility and maturity in dealing with health issues. The Board encourages applicants who may benefit from treatment to seek it.

On occasion, a license is denied or deferred when an applicant's ability to function is impaired in a manner relevant to the practice of law at the time the licensing decision is made, or when an applicant demonstrates a lack of candor by his or her responses. This is consistent with the public purpose that underlies the licensing responsibilities assigned to the Board of Bar Examiners. Further, each applicant is responsible for demonstrating that he or she possesses all the qualifications to practice law.

The Board does not, by its questions, seek information that is fairly characterized as situational counseling. Examples of situational counseling include stress counseling, domestic counseling, grief counseling, and counseling for eating or sleeping disorders. Generally, the Board does not view these types of counseling as relevant to the issue of whether an applicant is qualified to practice law.

YES 18.1 Within the past five (5) years, have you exhibited any conduct or behavior that could call into question your ability to practice law in a competent, ethical, and professional manner?

(A) Please provide full explanation.

My current employer had a social event that I attended. I drank excessively and embarrassed myself and co-workers. I was suspended from work one day without pay.

YES 18.2 Do you currently have any condition or impairment, including, but not limited to, (1) any related to substance or alcohol abuse, or (2) a mental, emotional, or nervous disorder or condition, which in any way affects your ability to perform any of the obligations and responsibilities of a practicing lawyer in a competent, ethical and professional manner? “Currently” means recently enough so that the condition could reasonably have an impact on your ability to function as a practicing lawyer.

(A) Please provide full explanation.

I have been treated for major depression and alcoholism since 2005.

ATTACH Character & Fitness Healthcare Form completed by your treating healthcare professional.

Please provide all treating healthcare professionals or facilities related to your YES answer to 13.1 and 13.2.

1. Treating professional: Dr. Hunt  
   Treatment facility: Hospital  
   Street: 123 Main Street  
   City: Richmond  
   From month/year: Sep 2011  
   To month/year: Sep 2015

   Treating professional title: Doctor  
   Phone: (804) 555-2121  
   State: VA  
   ZIP: 23222
<table>
<thead>
<tr>
<th>Treating professional</th>
<th>Dr. Stealth</th>
<th>Treatment professional title: Good guy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment facility</td>
<td>Somewhere</td>
<td>Phone (505) 487-5155</td>
</tr>
<tr>
<td>Street</td>
<td>321 South</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>Richmond</td>
<td>State VA</td>
</tr>
<tr>
<td>From month/year</td>
<td>Feb 2005</td>
<td>To month/year Apr 2009</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
To be used with Section 18 – Health Matters

CHARACTER & FITNESS HEALTHCARE FORM

➤ TO BE COMPLETED BY A LICENSED HEALTHCARE PROFESSIONAL

Patient’s full name: Jane Smith Doe
DOB: January 1, 1985
SSN (Last 4): 9999

Dates of treatment from month/year: Sep 2011
To month/year: Sep 2015

Treating professional: Dr. Hunt
Title: Doctor
Treatment facility: Hospital

Current street: 123 Main Street
City: Richmond
State: VA
ZIP: 23222

Phone: (804) 555-2121

Describe the condition/diagnosis and any treatment or monitoring program for which you are or have treated the above-named Applicant in the past five (5) years:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Prognosis: Is it your opinion this condition will affect the Applicant's fitness or ability to perform the duties of an attorney in a competent, ethical and professional manner?

Yes or No

If yes, please explain

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Licensed Healthcare Professional – Print Name

Licensed Healthcare Professional Signature

Date

CFQ - Page 20 of 26
CHARACTER & FITNESS HEALTHCARE FORM

➤ TO BE COMPLETED BY A LICENSED HEALTHCARE PROFESSIONAL

Patient’s full name: Jane Smith Doe
DOB: January 1, 1985
SSN (Last 4): 9999

Dates of treatment from month/year: Feb 2005
To month/year: Apr 2009

Treating professional: Dr. Stealth
Title: Good guy
Phone: (505) 487-5155

Treatment facility: Somewhere
Current street: 321 South
City: Richmond
State: VA
ZIP: 23232

Describe the condition/diagnosis and any treatment or monitoring program for which you are or have treated the above-named Applicant in the past five (5) years:

__________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

Prognosis: Is it your opinion this condition will affect the Applicant’s fitness or ability to perform the duties of an attorney in a competent, ethical and professional manner?
Yes or No
If yes, please explain

__________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

Licensed Healthcare Professional – Print Name

Licensed Healthcare Professional Signature

Date
Section 19 – Health Legal Issues

19.1 Within the past five (5) years, have you ever raised the issue of consumption of drugs or alcohol or the issue of a mental, emotional, nervous or behavioral disorder/condition as a defense, mitigation, or explanation for your actions in the course of any of the following:

NO (A) Administrative proceeding or investigation?

YES (B) Judicial proceeding or investigation?
Please furnish a thorough explanation including pertinent names, addresses, dates, and references to records, as appropriate.

DIP 2009 Case #09-123456 Brooklyn, NY

YES (C) Probation, suspension or dismissal by an educational institution?
Please furnish a thorough explanation including pertinent names, addresses, dates, and references to records, as appropriate.

Brooklyn University - Yes, I was placed on social probation for one year in 2009 following a drunk in public charge.

19.2 Within the past five (5) years, has the issue of drugs or alcohol or the issue of a mental, emotional, nervous or behavioral disorder/condition brought about a termination, proposed termination, request to resign, or any other disciplinary action by any of the following:

YES (A) Educational institution?
Please furnish a thorough explanation including pertinent names, addresses, dates, and references to records, as appropriate.

Brooklyn University, Fall 2009. When our sorority was charged with possession of marijuana we were subject to school disciplinary action which the school delayed pending the outcome of the case. When the case was dropped, the school also dropped their disciplinary action against us.

NO (B) Employer?

NO (C) Government agency?

NO (D) Professional organization?

NO (E) Licensing authority?
In your own handwriting, write the following:

I understand and acknowledge that my application for admission to the Bar of Virginia is a continuing process and that I have an obligation to inform the Board of Bar Examiners, promptly and in writing, of any change in any of the information I have provided in this Questionnaire and in any attachment hereto. I agree to cooperate fully by furnishing any supplemental information requested by the Board or the Character & Fitness Committee (and the agents thereof) so that the Board and the Committee will have all information relevant to my character and fitness to practice law when making a decision on my application.

Failure to respond promptly to requests for information violates Section III, 2(N) of the Rules of the Virginia Board of Bar Examiners and could delay the processing of my Character & Fitness application. Any delay without cause may affect the consideration of my Character & Fitness.

Until I am licensed, admitted and registered as a member of the Virginia State Bar, I must immediately report the following, in writing, to the Virginia Board of Bar Examiners: any change in my personal, educational, or professional status that may affect my standing relative to my character and fitness to practice law. This includes anything that would modify any of the responses on this Questionnaire or subsequent updates.
Authorization and Release Form (Original 1)

I, ___________________________,

Full Legal Name

Jane Smith Doe

born, Richmond, Virginia on, January 1, 1985

In furtherance of my application for admission to the Bar of Virginia, I do hereby swear or affirm that I have read the foregoing document and have answered all questions fully and frankly. The answers are complete and true of my own knowledge. I hereby (a) authorize and request every person, firm, corporation, association, court, school, college, university, other educational institution, governmental and law enforcement and other agencies, including healthcare professionals and institutions, having control of any documents, records or other writing, or having other information pertaining to me (including but not limited to educational records as defined in 20 USC § 1232g; confidential records; medical records and records concerning advice, care or treatment provided to me; files of bar associations or disciplinary agencies regarding charges or complaints filed against me, formal or informal, pending or closed, or other pertinent data) to furnish to the Virginia Board of Bar Examiners, and its agents or representatives, any such writings and information the Board believes may relate to my moral character, professional reputation, and/or fitness to engage in the practice of law, and to permit the Board and any of its agents or representatives to inspect and make copies of such documents, records, and other writings; (b) agree that all information provided by this application, and all other information received by the Board and believed by it to have a bearing upon my moral character, professional reputation, and/or fitness to engage in the practice of law, may be released by the Board at any time, and without liability to the Board, its members, agents, or other representatives, to any investigatory or regulatory body or agency having jurisdiction over admission to the bar or the discipline of lawyers, when such release is considered to be reasonably needed by such body or agency in response to its inquiry relating to my moral character, professional reputation, and/or fitness to engage in the practice of law; and (c) agree that the foregoing shall remain in effect for any future examination for which I may make application to the Virginia Bar. I release the National Conference of Bar Examiners and any person furnishing information in the course of the investigation of my character, professional reputation, and/or fitness to engage in the practice of law from all liability of any kind arising out of the furnishing of such information and documents. Since this is a continuing Questionnaire, I will submit such additional affidavits, documentation, or information as may be requested or as may be required by any change in my situation up to the date of my appearance before the Supreme Court of Virginia to be administered the oath of an attorney and counselor at law. I recognize and acknowledge that making a materially false statement in, or failing to disclose a material fact requested in connection with an application for admission to the bar is a violation of Rule 8.1, Virginia Rules of Professional Conduct. A photocopy of the foregoing authorization shall be as valid as an original.

__________________________________________
Signature of Applicant

Commonwealth/State/District of ________________________________

County/City of ________________________________

I, a Notary Public of such County/City, certify that on this day personally appeared before me

Jane Smith Doe

who thereupon made oath that all statements contained in this application are true and complete.

Given under my hand this ______________ day of __________________, ____________

My commission expires on ______________ day of __________________, ____________

__________________________________________
Notary Public

Registration Number (if applicable) ________________

NOTARY SEAL (must be affixed)

Revised September 2016
I, Jane Smith Doe, born, Richmond, Virginia on, January 1, 1985

In furtherance of my application for admission to the Bar of Virginia, I do hereby swear or affirm that I have read the foregoing document and have answered all questions fully and frankly. The answers are complete and true of my own knowledge. I hereby (a) authorize and request every person, firm, corporation, association, court, school, college, university, other educational institution, governmental and law enforcement and other agencies, including healthcare professionals and institutions, having control of any documents, records or other writing, or having other information pertaining to me (including but not limited to educational records as defined in 20 USC § 1232g; confidential records; medical records and records concerning advice, care or treatment provided to me; files of bar associations or disciplinary agencies regarding charges or complaints filed against me, formal or informal, pending or closed, or other pertinent data) to furnish to the Virginia Board of Bar Examiners, and its agents or representatives, any such writings and information the Board believes may relate to my moral character, professional reputation, and/or fitness to engage in the practice of law, and to permit the Board and any of its agents or representatives to inspect and make copies of such documents, records, and other writings; (b) agree that all information provided by this application, and all other information received by the Board and believed by it to have a bearing upon my moral character, professional reputation, and/or fitness to engage in the practice of law, may be released by the Board at any time, and without liability to the Board, its members, agents, or other representatives, to any investigatory or regulatory body or agency having jurisdiction over admission to the bar or the discipline of lawyers, when such release is considered to be reasonably needed by such body or agency in response to its inquiry relating to my moral character, professional reputation, and/or fitness to engage in the practice of law; and (c) agree that the foregoing shall remain in effect for any future examination for which I may make application to the Virginia Bar. I release the National Conference of Bar Examiners and any person furnishing information in the course of the investigation of my character, professional reputation, and/or fitness to engage in the practice of law from all liability of any kind arising out of the furnishing of such information and documents. Since this is a continuing Questionnaire, I will submit such additional affidavits, documentation, or information as may be requested or as may be required by any change in my situation up to the date of my appearance before the Supreme Court of Virginia to be administered the oath of an attorney and counselor at law. I recognize and acknowledge that making a materially false statement in, or failing to disclose a material fact requested in connection with an application for admission to the bar is a violation of Rule 8.1, Virginia Rules of Professional Conduct. A photocopy of the foregoing authorization shall be as valid as an original.

________________________________________
Signature of Applicant

________________________________________
Commonwealth/State/District of

________________________________________
County/City of

I, Jane Smith Doe of such County/City, certify that on this day personally appeared before me

who thereupon made oath that all statements contained in this application are true and complete.

Given under my hand this day of ,

My commission expires on ,

________________________________________
Notary Public

________________________________________
Registration Number (if applicable)

NOTARY SEAL (must be affixed)

Revised September 2016
Affidavit of Non-Immigration/Immigration Status

This Affidavit must be completed and submitted with your Character & Fitness Questionnaire/Update.

I, Jane Smith Doe, certify that I currently reside legally in the United States according to the United States Immigration Laws and Regulations by holding a valid visa.

List type of visa: B-1

I intend to lawfully maintain my present non-immigrant/immigrant status in the United States according to the United States Immigration Laws and Regulations for which I was approved and will thereby maintain such status as I complete the character and fitness process, and as long as I reside in the United States.

I understand that the Character & Fitness Questionnaire/Update is a continuing application, and that until I am licensed, admitted and registered as a member of the Virginia State Bar, I must keep the Board informed of any changes that will affect my visa status as it relates to my Character & Fitness Questionnaire/Update.

I am aware that the documentation I provide may be submitted to the United States Citizenship and Immigration Services (USCIS) for verification of authenticity.

Check (✓) all that apply to you, and provide a COPY of all documentation to support your claims made in this Affidavit including:

✓ Valid immigration visa
✓ Front and back of Employment Authorization Document
✓ Current valid passport
✓ Front and back of my Social Security card
✓ Current I-94 Arrival/Departure Record

F-1 Visa holders must also provide a copy of the following documentation:
- Current I-20 ID signed by Designated School Official (DSO)
- I-20 ID with Optional Practical Training (OPT) authorized or letter of eligibility signed by DSO stating you will timely seek OPT authorization

H-1B Visa holders must also provide a copy of the following documentation:
- Current I-129 Petition filed on your behalf
- Notice of Approval by USCIS for I-129 Petition

__________________________________________________________
Signature of Applicant

Commonwealth/State/District of ____________________________________________
County/City of _____________________________________________________________

I, a Notary Public of such County/City, certify that on this day personally appeared before me

Jane Smith Doe

who thereupon made oath that all statements contained in this application are true and complete.

Given under my hand this ______________ day of __________________ , __________
My commission expires on __________________________  __________ , __________

__________________________________________________________
Notary Public

Registration Number (if applicable) ______________

NOTARY SEAL (must be affixed)

Revised September 2016