

KY Bar Association, CLE Commission, 514 West Main Street, Frankfort KY 40601-1883  
Phone (502) 564-3795 FAX (502) 564-3225 www.kybar.org

## Application for EXEMPTION from Mandatory New Lawyer Program

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See SCR 3.640 - New Lawyer Program

1. Name and address of applicant (please type or print):

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Telephone number: \_\_\_\_\_

2. Date of admission to membership in the KBA: \_\_\_\_\_

3. Have you been admitted to practice law in another jurisdiction(s) for at least five (5) years?

Yes

No

If yes, please list the jurisdiction(s) and your date of admission to practice (MUST BE COMPLETE):

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Applicant is a member who has been admitted to practice law in another jurisdiction for a *minimum* of five (5) years or has been admitted to practice under terms of reciprocity from another jurisdiction as set forth in SCR 2.110, and is hereby eligible to be exempted from the New Lawyer Program as provided at SCR. 3.640(7).

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

KBA ID Number: \_\_\_\_\_