

UNITED STATES DISTRICT COURT
DISTRICT OF HAWAII
PETITION FOR ADMISSION TO PRACTICE



Application Fee: \$250.00

IN THE MATTER OF THE APPLICATION OF
(Enter your name as you wish it to
appear in the records of the Court.)

Attorney ID #
(as assigned by the
Hawaii Supreme Court)

First
Middle (optional):
Last

I, the above stated applicant, hereby petition for admission to practice in the United States District Court for the District of Hawaii. I have not been suspended for misconduct or any other cause or denied admission to practice before any court. Once admitted to the United States District Court for the District of Hawaii, I will register for an Electronic Case Filing (ECF) account. I certify that the following information is true and correct, and that I have met all of the qualifications and requirements according to Local Rule 83.1. In support of my petition I state as follows:

Residential Address
City State Zip Code

Employer Name
Business Address
City State Zip Code

Email Address
Phone

Date (to be) admitted to practice by the Hawaii Supreme Court
(MM/DD/YYYY)

Law School Name
Graduation Date

I, the applicant above, do solemnly swear (or affirm) that as an attorney and counselor of this Court, I will conduct myself uprightly and according to law; and that I will support the Constitution of the United States.

I have read and accept the above statements.

Petitioner Signature

Date