The State Bar of California

PRACTICAL TRAINING OF LAW STUDENTS PROGRAM
SUPERVISING ATTORNEY DECLARATION

STUDENT INFORMATION

Student Name: _____ File Number: _____

SUPERVISING ATTORNEY INFORMATION

Supervising Attorney Name: _____

Employer: _____

Employer Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone Number: _____

Anticipated Period of Supervision – Start Date: _____ End Date: _____
(MM/DD/YYYY)   (MM/DD/YYYY)

DECLARATION

I declare under penalty of perjury under the laws of the State of California that the following is true and correct:

- I am an active licensee in good standing of the State Bar of California.

- I have practiced law in California or taught law in a law school as a full-time occupation for at least two years before supervising the certified law student.

- I will supervise the permitted activities of the certified law student as specified by rule 9.42(d) of the California Rules of Court and rule 3.6 of the Rules of the State Bar of California.

- I will supervise the certified law student as required by rule 3.6 of the Rules of the State Bar.

  o I will personally assume professional responsibility for any activity the certified law student performs as part of the program.

San Francisco Office
180 Howard Street
San Francisco, CA 94105

www.calbar.ca.gov

Los Angeles Office
845 S. Figueroa Street
Los Angeles, CA 90017

- o I will provide training and counsel that prepares the certified law student to satisfactorily perform in a manner that best serves the interests of the client.

- o I will read, approve, and sign any document prepared by the certified law student for a client.

- o I will supervise no more than 5 certified law students concurrently unless I am employed full-time to supervise law students as part of an organized law school or government agency training program, in which case I will supervise no more than 25 certified law students.

- I will promptly notify the State Bar if I no longer meet the requirements of the governing rules or my supervision is ending before the period stated in the Notice of Certification, which I will receive upon approval of the application.

_____

Student Name

_____   _____

Supervising Attorney's Signature   Date

_____   _____

Print Name   State Bar Number