DIVISION OF REGULATION

180 Howard Street, San Francisco, CA 94105

415-538-2120

LEGAL SPECIALIZATION APPLICATION FOR RECERTIFICATION

When is my application due?

The application is due on or before the end of your current certification term. Applications may be submitted in advance but no earlier than six months prior to the end of your term. You can find your current certification term by going to Specialization Certifications after successfully logging into the Admissions Applicant Portal.

Have I included the correct fee?

A \$359* processing fee, payable either via check or credit card to the State Bar of California, is due with the application.

What happens if I don't fill out my application correctly?

If your application is incomplete or if any information provided is insufficient, you will receive notice to correct the deficiency. If you fail to correct the deficiency within 60 days from the date of the notice, the application shall be deemed withdrawn without a refund of the fee. We may request additional or supplemental nonconfidential information in order to show compliance with recertification requirements.

INSTRUCTIONS FOR SELECTED QUESTIONS AND ATTACHMENTS

APPLICATION FORM

Personal Information

Enter your official State Bar name and address of record. This is the information that appears in State Bar Licensee Records. Use the State Bar's Attorney Search to verify the information is current. If the information is not current, you must update your information pursuant to Business and Professions Code section 6002.1, through My State Bar Profile.

Please be aware that all correspondence will be sent to you at your official address of record registered in the Applicant Portal.

Discipline

Section 3.113 of the Rules provides that the California Board of Legal Specialization may take the following into account in considering your application:

Final disciplinary actions imposed for professional misconduct by any court or body before whom you appear. Include: (1) title of disciplinary action; (2) action number; (3) nature of charge; (4) nature of sanction; (5) date sanction was imposed; and (6) date sanction was terminated. For nonattorney professional discipline (e.g., accountancy), provide information similar to above.

Felony convictions. Provide the case number, title, date of conviction, and where it was filed.

Resignation from any State Bar, court, or body before whom you appear. Provide the name of the entity, the effective resignation date, and the reason.

Judgments of professional negligence. Include only if there were three or more judgments against you during the certification term. Provide the case number, title, date judgment was rendered, and where it was filed.

Sanctions. Include only sanctions, other than discovery sanctions, of \$1,000 or more. Provide a copy of the order.

Findings of contempt. Provide a copy of the findings.

ATTACHMENTS

A. Task and Experience Requirement

Refer to the Standards for your specialty area for the specific requirements.

B. Education Requirement

Note that you do not need to submit any education with this application. Your Legal Specialist Continuing Legal Education (LSCLE) is reported along with your MCLE Compliance Group, rather than as a part of this packet. For additional information regarding LSCLE reporting, please review the MCLE Requirements for Certified Specialists.

C. References

When listing a reference, please include the attorney's bar number. Use the <u>Attorney Search</u> to find an attorney(s) or judge's bar number.

CHECKLIST

Have y	ou:				
	Read the declaration?				
	Provided all information requested on the applicati	on and attachments?			
	Signed and dated the application?				
	Attached additional sheets if you needed more spa	ce?			
	Put your name on the top of all attachments?				
	Made copies for your records?				
	Enclosed a check/payment information for the app	ropriate recertification fee*?			
SUBM	ISSION INFORMATION				
Mail to	Mail to: Fax to:				
Divisio	The State Bar of California 415-538-2180 Division of Regulation - Legal Specialization Unit 180 Howard Street				

RESOURCES

San Francisco, CA 94105

- Please refer to the Standards for your specialty area as you complete the application and attachments.
- The Rules, Standards, and list of approved legal specialization education providers are available online at http://www.calbar.ca.gov/.
- All California licensees already have an account on the Applicant Portal, which is separate from your login credentials for My State Bar Profile. You should not create or register a new applicant portal account. If you have any questions or need assistance logging in, please see our <u>Applicant Portal FAQs</u> or submit an inquiry using the <u>Licensee Records and Compliance Inquiry Form</u>.

All unsuccessful payments will be assessed an administrative fee equal to the amount charged by the State Bar's banking institution or \$20, whichever is greater.

For credit card payments, a processing fee of 2.5 percent will be added to all charges. There is no processing fee associated with payments by check.

^{*}You may submit payment of the \$359 processing fee via check or credit card.

DIVISION OF REGULATION



180 Howard Street, San Francisco, CA 94105

415-538-2120

APPLICATION FOR RECERTIFICATION Immigration & Nationality Law Certified Specialist

Filing Fee - \$359*

*You may submit payment via check or credit card.

Note the recertification fee is separate from your Legal Specialization Program Annual Fee.

ERSONAL I	NFORMAT	ION —			
Name: _				Bar Number:	
Phone: _					
Address:	:				
City:			State:	Zip:	
any addı Admissid Howeve	ress chang ons Applica r, you may	oility to inform the Legal Spe es. All correspondence will l ant Portal. We will update y also change your address, o lmissions Applicant Portal a	be sent to the curre rour email to the e email and/or telepl	ent information on file mail provided below. none number on your	in the
login cre	edentials. Y n, please s	nt Portal is separate from yo ou should not create or reg see our <u>Applicant Portal FAC</u> and Compliance Inquiry Forr	ister a new accoun <u>ls</u> or submit an inq	t. If you need assistand	I .
Email Ad	ldress:				
ECERTIFICA	ATION ELIG	GIBILITY —			
At the ti	me of appl	ying for recertifying, I am ar	n active licensee of	the State Bar of Califo	rnia.
☐ Yes	□ No	IF NO, STOP HERE. YOU	ARE NOT ELIGIBLE	TO APPLY.	

PR	ACTICE REC	QUIREMENT					
	I have been engaged in the practice of immigration & nationality law for at least 25 percent of the time spent in my occupational endeavors during the previous five years						
	☐ Yes		F NO, PLEASE EXPLAIN O APPLICATION	N A SEPARATE SHEET AN	ID ATTAC	Н ТО Т	HIS
ΕN	1PLOYMEN	T HISTORY					
	Add any new employment information that has changed since your most recent application. ATTACH SEPARATE SHEETS IF NECESSARY.						
	☐ Check here if additional sheets are attached.						
						<i>-</i> .	_

Dates of Employment	Employer	Address	Nature of Employment (summarize nature of work performed)

DISCIPLINE				
Within the five years immediately preceding submission of this application	า:			
Were you disbarred, suspended or disciplined by the State Bar of California or similar attorney disciplinary authority or any other authority that imposes professional discipline in California, or in another state or jurisdiction, including a foreign jurisdiction, or by any bankruptcy court, or do you have any discipline pending?		Yes		No
Do you have any discipline charges pending as described above?		Yes		No
Did you have any felony convictions?		Yes		No
Did you resign from any bar, court or body before whom you appear?		Yes		No
Were there three or more judgments of professional negligence against you? (If yes, please attach the relevant documents.)		Yes		No
Were any sanctions, other than discovery sanctions, entered against you by any court or body before whom you appear?		Yes		No
Were any findings of contempt been made against you by any court or body before whom you appear?		Yes		No
IF YOU ANSWER YES TO ANY OF THE ABOVE, YOU MUST PROVIDE FULL DE SEPARATE SHEET. A record of discipline or failure to disclose any of the infrequested above may constitute grounds for denial of your application.			A	

DECLARATION

I hereby authorize all educational institutions, governmental agencies and instrumentalities (including bar associations and bar examiners of other jurisdictions), employers and business and professional associates (past and present), to release to the State Bar of California Board of Legal Specialization (CBLS) and/or its agents or advisors any nonprivileged information, files or records requested by them for the purpose of processing this application. The foregoing release does not apply to matters communicated by me in confidence to any lawyer, spouse, physician, psychotherapist or clergyperson for which I have privilege of nondisclosure under the provisions of Chapter 4, Division 8 of the California Evidence Code.

I further authorize the CBLS to conduct independent inquiry and review, including contacting the references I provide and other references within the discretion of the CBLS and agree that neither I nor my agents will seek to review the materials collected during the evaluation of my application.

I agree to pay all fees required by the CBLS, as described in the Rules of the State Bar, Appendix A: Schedule of Charges and Deadlines.

I agree to abide by all rules and regulations of the CBLS as amended from time to time and to furnish to the CBLS such information as it may require, to evaluate my application.

I am the applicant herein for certification as a specialist under the State Bar of California Program for Certifying Legal Specialists.

I fully understand that failure to make a truthful disclosure of any fact, item or information required may result in the denial of my application, revocation of my certificate of specialization, or disciplinary action by the State Bar of California.

I have carefully read and answered each question completely and truthfully in the foregoing application and any attachments hereto, and certify that the information therein is true and correct to the best of my knowledge.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration is executed on:

Date:		
Print Name:		
Signature:		

IMMIGRATION & NATIONALITY LAW RECERTIFICATION Attachment A – Task and Experience Requirement

Applic	ant Name: Bar Nu	mber:
	ate Bar of California Board of Legal Specialization may require addit sks and experience as indicated in this Attachment A.	ional evidence of completion o
CHECK	THE BOXES THAT APPLY	
Withi	n the five years immediately preceding submission of this application	n, I have:
□ A.	Direct and substantial participation as attorney in at least 150 cases nationality law.	in the field of immigration &
	A list of cases may be required by the CBLS at a later date.	
	AND	
□ В.	Participated as principal attorney in six of the following 13 procedures:	res, with at least three cases in
	Record the number of cases for each procedure you have checked. A by the CBLS at a later date.	list of cases may be required
	PROCEDURE	NUMBER OF CASES

	PROCEDURE	NUMBER OF CASES
1.	Naturalization or Nationality cases	
2.	Administrative Appellate Practice	
3.	Judicial review of immigration proceedings in the federal courts (includes, but not limited to: Petition for Review, Habeas Corpus, Petition for Declaration of Judgment, Writ of Mandamus)	
4.	Labor certifications	
5.	Contested removal, deportation or exclusion hearings or rescission proceedings before immigration judges	
6.	Motion, writs or pleas in criminal cases relating to collateral immigration consequences in federal or state courts	
7.	Bond or custody proceedings	

PROCEDURE	NUMBER OF CASES
8. Refugee or asylum applications	
9. State Department or Consular Practice	
10. Immigration visa petitions, applications, or immigrant waivers	
11. Immigration consequences of mergers, reorganizations, downsizing and other business or employment changes	
12. Nonimmigrant visa petitions or applications, or nonimmigrant waivers (includes, but not limited to ancillary applications such as labor condition applications)	
13. Other (please describe). SEE SECTION 2.2.13 OF THE STANDARDS FOR FURTHER INFORMATION.	
TOTAL	
OTHER EXPERIENCE If you are unable to meet any part of the requirement above, you must sublidemonstrating substantial compliance with the requirements. Please descri	be the nature of your practice.
OTHER EXPERIENCE If you are unable to meet any part of the requirement above, you must substance of the requirements. Please describle of the requirements. Please describle of the detailed information regarding your experience as it relates to the following of the requirements of additional forms of immigration & national in fulfilling the requirements of substantial involvement. ATTACH SEPAR	be the nature of your practice. oregoing requirements. Ality practice for consideration
OTHER EXPERIENCE If you are unable to meet any part of the requirement above, you must substance with the requirements. Please descriunclude detailed information regarding your experience as it relates to the following the submitting alternative or additional forms of immigration & national	be the nature of your practice. oregoing requirements. Ality practice for consideration
OTHER EXPERIENCE If you are unable to meet any part of the requirement above, you must substance with the requirements. Please descriunclude detailed information regarding your experience as it relates to the following the submitting alternative or additional forms of immigration & national	be the nature of your practice. oregoing requirements. Ality practice for consideration
OTHER EXPERIENCE If you are unable to meet any part of the requirement above, you must substance with the requirements. Please descriunclude detailed information regarding your experience as it relates to the following the submitting alternative or additional forms of immigration & national	be the nature of your practice. oregoing requirements. Ality practice for consideration
OTHER EXPERIENCE If you are unable to meet any part of the requirement above, you must subsidemonstrating substantial compliance with the requirements. Please descriunclude detailed information regarding your experience as it relates to the following the submitting alternative or additional forms of immigration & national	be the nature of your practice. oregoing requirements. Ality practice for consideration

LEGAL SPECIALIST CONTINUING LEGAL EDUCATION REQUIREMENT FOR RECERTIFICATION Attachment B – Legal Specialist Continuing Legal Education (LSCLE) Compliance Reporting Schedule

Applicant Name:	Bar Number:	

LSCLE Compliance Reporting Schedule

Legal Specialist Continuing Legal Education is no longer reported in the recertification application.Specialists must report their LSCLE Compliance on the same three-year schedule as their general MCLE Compliance.

For additional information regarding LSCLE reporting, please review the <u>MCLE Requirements for Certified Specialists</u> page of the State Bar website.

REFERENCE REQUIREMENT FOR RECERTIFICATION Attachment C – Independent Inquiry and Review

Applicant Name:	Bar Number:					
Please submit the names of a minimum of three attorneys or judges who have had an opportunity to observe your work and who can attest to your proficiency in the practice of the specialty area under the laws applicable to the specialty in California.						
To expedite your application, please include the following among your references if possible: opposing counsel, attorneys from other firms, and judges, commissioners, or magistrates before whom you have appeared. References may include attorneys who are clients, partners, associates, employers, or employees. Note, however, that references will be asked to disclose any such relationship.						
•	or of California via electronic questionnaire. The information Bar of California and shall not be revealed to you.					
to the right individual. Bar numbers can be	Include each reference's California bar number to ensure that reference forms are sent promptly and to the right individual. Bar numbers can be found online at www.calbar.ca.gov under Attorney Search. If the reference does not have a California Bar number, is a judge, or licensed in another state, please provide a full address.					
NAME AND BAR NUMBER	ADDRESS					
1.						
2.						
3.						
4.						
5.						
6.						
7.						

LEGAL SPECIALIZATION APPLICATION Payment Authorization Form

State Bar Number:	<u> </u>	
Applicant's Full Name:		
Mailing Address:		
Telephone:	Email:	
DESCRIPTION		FEE
☐ Legal Specialization Post-Examination Application	ation for Initial Certification Fee	\$308
☐ Legal Specialization Application for Recertific	ation Fee	\$359
	TOTAL*	•
*For credit card payments, a processing fee of 2. no processing fee associated with payments by a	•	narges. There is
All unsuccessful payments will be assessed an action by the State Bar's banking institution or \$20, wh		nount charged
This form may not be used to pay dues or other associated to the Legal Specialization program.	• •	ed to pay fees
☐ Personal/Cashier's Check or Money Order (Make checks payable to The State Bar of Cash)	lifornia)	
☐ Credit Card		
Credit Card Number:		
Credit Card Security Code:	Expiration Date (Month/Year):	
Credit Card Type: American Express	☐ Discover ☐ MasterCa	rd 🗆 Visa
Name on Card:		
Signature of Card Holder:	Date:	
Py my signature on this document. I we guth	oriza tha Stata Bar of California	to charge

By my signature on this document, I/we authorize the State Bar of California to charge my/our credit card account for the amount listed in the 'Total' box above.