

UNITED STATES COURT OF INTERNATIONAL TRADE

Office of the Clerk
 Admissions Office - Room 299
 One Federal Plaza, New York, NY 10278-0001
 Telephone: 212-264-2812

APPLICATION FOR ADMISSION TO PRACTICE

PART I - COMPLETED BY APPLICANT

I, _____, hereby apply for admission to practice before the United States Court of International Trade and make the following statements:

1. My contact information is:

Affiliation/Firm: _____
 Title (if any): _____ Firm Telephone: _____
 Address: _____ Suite/Floor: _____
 City: _____ State: _____ Zip: _____
 County: _____ E-Mail: _____
 Direct Telephone: _____ Fax: _____

2. I hereby certify that I meet the qualifications of CIT Rule 74(a) to practice before the United States Court of International Trade based on my admission and membership in good standing in the court listed below:

Title of Court

Date of Admission

Have you ever been censured, disbarred or suspended from practice before any court? (Check the applicable answer).

No ☐

Yes ☐ (If you answer yes, check the applicable answer to the following questions, and attach a separate statement explaining the nature of such actions or proceedings):

Are there any disciplinary proceedings presently pending against you? Yes ☐ No ☐

I did ☐ did not ☐ resign while disciplinary proceedings were pending.

I verify that I am attaching a separate statement explaining the nature of the proceedings. ☐

3. If requesting an expedited review of your application, detail any exigent factors that demonstrate that expedited treatment is warranted:

3.4. ☐ For all attorneys other than attorneys employed by the U.S. government: I have enclosed my \$199 admission fee.

☐ I have not enclosed an admission fee because I am an attorney employed by the U.S. government entitled to waiver of the fee under USCIT Rule 74(b)(3). I understand I will not receive a Certificate of Admission.

☐ Although I am entitled to waiver of the fee as an attorney employed by the U.S. government, I request a Certificate of Admission and have included my \$45 certificate fee.

- 4.5. If this application is not submitted on oral motion, or if submitted on oral motion and the sponsoring attorney making the motion has not known me for more than one year, I enclose a certificate stating that I am a member in good standing of the court identified in part 2 above issued by a judge of or the clerk of that court, or by another official duly authorized to issue such certificates.

☐ (Check, if applicable) A “certificate of good standing,” dated not more than ninety (90) days prior to this application, is attached.

6. If you are a sole practitioner (all other attorneys may skip this question), you must designate below a licensed attorney who has agreed to serve as a point of contact in the event of your death or incapacity, to assist with client file management and continuity of representation before the Court.

☐ (Check, if applicable) I am a sole practitioner and designate the following attorney who has consented to serve as a point of contact in the event of my death or incapacity, to both assist with client file management and continuity of representation before the Court:

Name of Designated Attorney: _____
 Affiliation/Firm: _____
 Title (if any): _____ Firm Telephone: _____
 Address: _____ Suite/Floor: _____
 City: _____ State: _____ Zip: _____
 County: _____ E-Mail: _____
 Direct Telephone: _____ Fax: _____

- 5.7. I, _____, do solemnly swear (or affirm) that I will faithfully conduct myself as an attorney and counselor-at-law of this Court, uprightly and according to law, and that I will support the Constitution of the United States, so help me God.

I have read and am familiar with the *Rules of the United States Court of International Trade*.

If any of the information provided herein changes, I will promptly notify the Court by submitting a Request for Change in Information.

I declare under the penalty of perjury that the foregoing is true and correct.

Date: _____ Signature of Applicant: _____

or, if signed outside the United States of America,

I declare under the penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Date: _____ Signature of Applicant: _____

PART II - COMPLETED BY SPONSORING ATTORNEY (if applicable)

I, _____ (insert name of sponsoring attorney), a member of the bar of this Court or of the Supreme Court of the United States, move the admission to practice before this Court of _____ (insert name of applicant).

I have known the applicant since _____ (insert approximate month and year) and consider the applicant to be a person of good moral character and in every way qualified to practice as a member of the Bar of this Court.

I have read the application for admission, and, to the best of my knowledge and belief, the statements therein are true.

Signature of Sponsoring Attorney *Date* *Name, Firm, Address, Telephone Number and E-mail Address*

PART III - COMPLETED BY JUDGE

Application for Admission approved on *(date)* _____, at *(place)* _____.

Signature of Judge: _____

(As amended Jan. 1, 1996, eff. Jan. 1, 1996; March 25, 1998, eff. July 1, 1998; Sept. 30, 2003, eff. Jan. 1, 2004; Nov. 28, 2006, eff. Jan. 1, 2007; Nov. 25, 2008, eff. Jan. 1, 2009; March 24, 2009, eff. May 1, 2009; Nov. 25, 2009, eff. Jan. 1, 2010; March 27, 2012, eff. May 1, 2012; Dec. 23, 2016, eff. Feb. 1, 2017; Mar. 23, 2021, eff. May 3, 2021; Dec. 12, 2023, eff. Jan. 22, 2024; _____, eff. _____.)

Advisory Committee Note

Form 10 is amended by including a new request for solo practitioners to include the name, firm name, mailing address, telephone number, and e-mail address of a licensed attorney designated by the solo practitioner to act as a point of contact in the event of their death or incapacity. Form 10 is also amended with a statement that the attorney agrees to notify the Court promptly of any changes to the information provided on Form 10. These changes ensure that the Court possesses accurate contact information for attorneys, and accurate contact information for a designated attorney in the event a solo practitioner dies or becomes incapacitated.

Form 10 is amended to request the applicant detail any exigent factors that demonstrate that expedited treatment is warranted if the applicant is requesting an expedited review.

To be consistent with other CIT forms, date, name, firm, telephone number and e-mail address were added to the "Signature of Sponsoring Attorney" line.