

SUPREME COURT OF THE STATE OF NEW YORK
APPELLATE DIVISION: _____ JUDICIAL DEPARTMENT

In the Matter(s) of the Application(s) of
(see attached)

for Authorization to Engage in the
Limited Practice of Law

**AFFIRMATION OF EMPLOYER
SUPPORTING APPLICATION(S) FOR
AUTHORIZATION TO ENGAGE IN THE
LIMITED PRACTICE OF LAW**

_____, hereby affirms under penalty of perjury:

1. I am an attorney duly admitted to practice in the State of New York. I am employed by _____ (the “Employer”) to practice law in the State of New York. On behalf of the Employer, I respectfully submit this affirmation in support of the attached Application(s) for Authorization to Engage in the Limited Practice of Law (the “Application” or “Applications”) under the terms of the Temporary Authorization Program (the “Program”).

2. The Employer employs at its office in the State of New York the individual(s) named in the attached Application(s) (the “Applicant” or “Applicants”).

3. I am familiar with the requirements of the Program and I certify that, to the best of my knowledge, each Applicant is eligible to participate in the Program. Each Applicant (1) has received a J.D. or an LL.M. degree from a law school that is approved by the American Bar Association, (2) is qualified to take the New York State bar examination, pursuant to the Rules for the Admission of Attorneys and Counselors-at-Law, and (3) has not previously failed a bar examination administered in New York or in any other state or territory of the United States or in the District of Columbia.

4. I certify that each Applicant will work in the State of New York under the direct supervision of a qualified supervisor who is employed by the Employer. I understand that a qualified supervisor must be an attorney who has been duly admitted to practice in the State of New York for at least three years and is a member in good standing of the bar of the State of New York. I further certify that a qualified supervisor’s name will appear on all papers submitted to any court, tribunal, government agency, or other comparable authority, on which any Applicant’s name appears and that, whenever a signature is required by Part 130 of the Rules of the Chief

Administrator of the Courts (22 NYCRR part 130), the paper shall be signed by a qualified supervisor.

5. If any Applicant becomes ineligible for the Program at any time, I understand that the Applicant will no longer be permitted to engage in the limited practice of law pursuant to the Program, and I will promptly notify this Court and any other appropriate Department of the Appellate Division.

Dated: _____, New York
_____, 2020
