

**Board of Law Examiners**  
STATE OF WEST VIRGINIA  
City Center East, Suite 1200 B  
4700 MacCorkle Ave., SE  
Charleston, WV 25304  
Phone (800) 841-6212 OR (304) 558-7815

**APPLICATION AFFIDAVIT**

**NOTE:       SUBMIT ONE ORIGINAL OF THIS FORM WITH YOUR  
APPLICATION WITH ORIGINAL SIGNATURES OF APPLICANT  
AND NOTARY PUBLIC.**

I have read carefully the Rules of Professional Conduct and Code of Judicial Conduct promulgated by the Supreme Court of Appeals of West Virginia, and I understand that while I practice law in West Virginia I will be bound thereby. I further understand that even though I pass the bar examination, I may not practice law in West Virginia until I become an active member of the State Bar of West Virginia and pay the appropriate annual dues then in effect.

**The answers contained in my application are to be considered as continuing to be true from the date of this affidavit until the date of my admission to The West Virginia State Bar, and if any answer or portion of an answer ceases to be true, I acknowledge that I have a continuing obligation to immediately inform the District Character Committee and the Board of Law Examiners in writing.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

TO WIT:

On \_\_\_\_\_, 20\_\_\_\_, before me a Notary Public of such State and

County, appeared \_\_\_\_\_ who is the individual who executed this Affidavit, signed the supplemental answer sheets and initialed the exhibits attached to the application, if any, and swore that he or she read the application questions fully and answered them truthfully.

Subscribed and sworn to before me this the \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_. My commission expires on

\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

(SEAL)