

**RECRUITMENT ASSISTANCE PILOT PROGRAM  
ATTORNEY APPLICATION**

Office Use Only

**IDENTIFYING INFORMATION:**

Name: (Last, First, M.I.) \_\_\_\_\_

Address: \_\_\_\_\_

Mailing address if different: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

When is the best time to contact you? \_\_\_\_\_

Are you a U.S. citizen, U.S. National or permanent resident of the U.S.?

**EDUCATIONAL HISTORY:**

HS Diploma  GED  HSED  Year Completed \_\_\_\_\_

Name of High School attended: \_\_\_\_\_

College Degree: \_\_\_\_\_

Name of College attended: \_\_\_\_\_

Name of Law School attended: \_\_\_\_\_

Year of graduation from Law School: \_\_\_\_\_

**Please submit a copy of your law school transcript with this Application.**

Have you ever previously participated in ANY scholarship, loan repayment or tuition reimbursement program that obligated you to provide attorney services within an underserved area? Yes  / No

If yes, please indicate the name of the program and dates of participation:

\_\_\_\_\_

**Please submit a copy of your resume, complete with 3 references, with this Application.**

**LICENSES:**

Are you licensed to practice law? If so, where?

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Please provide a Certificate of Good Standing from the South Dakota Supreme Court with this Application. Failure to do so make you ineligible for this program and your application will be returned.

**RELOCATION:**

If selected for participation in this program, are you willing to locate both your law office and residence to the participating county you contract with? Yes  / No

**INSURANCE:**

Are you aware that you will be required to carry malpractice insurance and provide proof thereof if accepted into this program? Yes  / No

**LIABILITIES:**

Please list all of your debts in excess of \$1,000.00:

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**LEGAL DISCIPLINARY HISTORY:**

Have you ever been subject to an investigation or disciplinary action by any bar association in which you were a member? If so, what was the outcome?

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**LEGAL HISTORY:**

Have you ever been convicted or pled guilty to a felony, Class 1 misdemeanor or non-traffic Class 2 misdemeanor? If so, list the date and place where the crime was committed and a short narrative explaining the matter:

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Have you ever been a party in a civil suit other than small claims? If so, list the date and place where the case was filed and a short narrative explaining the matter:

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**MOTIVATION:**

From the list of eligible counties on the website, please provide your preference of where you would like to live and practice law if accepted into the Recruitment Assistance Pilot Program:

1st Choice: \_\_\_\_\_

2nd Choice: \_\_\_\_\_

3rd Choice: \_\_\_\_\_

Please explain your order of preference regarding eligible counties:

\_\_\_\_\_

Please explain why you want to be involved in the Recruitment Assistance Pilot Program:

\_\_\_\_\_

I, the undersigned, hereby waive any claim of confidentiality and consent to an inquiry into my professional record with the State Bar of South Dakota for purposes of this application.

I, the undersigned, attest and affirm that the above information is true and correct.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Forward your complete application to: State of South Dakota  
Unified Judicial System  
State Court Administrators Office 500 East Capitol Avenue  
Pierre, SD 57501-5070