**OFFICE OF LAWYER REGULATION INACTIVE TO ACTIVE**

**REINSTATEMENT QUESTIONNAIRE**

The petitioner requesting to transfer from inactive to active State Bar membership under SCR 10.03(3)(b)2. shall complete the Reinstatement Questionnaire, setting forth fully and accurately the information requested, and return the answers to the Office of Lawyer Regulation within fifteen (15) days of receipt thereof.

Your responses should be typed in a document that references the number of the question being answered; the questions themselves need not be typed out. Alternatively, if you have obtained this document electronically in Word format, you can type your responses directly into the document. Your responses must be sworn and notarized and will become a part of the record in your reinstatement proceeding.

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| 1. | Full legal name. |
| 2. | Any other name (s) you have been known by and the approximate dates you were know by the name(s). |
| 3. | Date of birth. |
| 4. | Daytime telephone number. |
| 5. | Email address. |
| 6. | Mailing address. |
| 7. | With respect to all law schools that you have attended, please provide the following: (a) Name and address of the school;(b) Dates attended;(c) Date and type of degree conferred, if any. |
| 8. | Have you ever been dropped, suspended, expelled or disciplined by a college, university or by any other institution of higher education? If so, identify the institution and describe the circumstances, including relevant dates. |
| 9. | If you have been admitted to practice law in any jurisdiction other than Wisconsin, for each jurisdiction state: (a) The date of admission; (b) The current status of your license and, if it is other than active an good standing, an explanation as to why; (c) If a grievance has been filed against you and, if so, provide a list of the grievances filed against you, the agency that investigated the grievance, a description of the allegation, name of the complainant, the date of the grievance, and the disposition;(d) If you have ever been disciplined and, if so, a citation to the disciplinary order and a description of the misconduct leading to the discipline. |
| 10. | If you have held or currently hold a professional license other than a license to practice law state:(a) The type of license(s) and the date you were licensed; (b) The name and address of the licensing authority;(c) The current status of the license(s);(d) If there has ever been an investigative, administrative, or judicial proceeding relating to that licensure and, if so, the outcome of that proceeding. |
| 11. | For all paid employment you have held since your admission to the State Bar of Wisconsin provide the following:(a) The name, address, telephone number, and email address of your employer; (b) The dates of your employment; (c) Your job title; (d) A description of your job duties; (e) Reason for leaving;(f) Account for any gaps in employment which exceed a three month period. |

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| 12. | For all non-paid activities you engaged in since your admission to the State Bar of Wisconsin, including but not limited to volunteer positions, educational pursuits, and family caretaking obligations state: (a) The name, address, telephone number, and email address of an organization or person who can attest to your engagement in the activity;(b) A description of the activity;(c) The dates you engaged in the activity;(d) Reason for leaving.  |
| 13. | Have you filed all federal, state, and other tax returns as required by law? If not state: (a) What returns are outstanding;(b) Why they have not been filed; (c) The amount of taxes owed, if any. |
| 14. | For any current debt exceeding $5000, state: (a) The name of the creditor;(b) The date(s) the debt was incurred; (c) An explanation of your plan for repayment of the debt. |
| 15. | Have you ever filed for bankruptcy? If so, provide the name, case no. and the resolution of the proceeding. |
| 16. | Have you ever been charged with a crime? If so, for each instance provide the case name, case number, and final adjudication of the charge(s). |
| 17. | Have you ever been charged with, or issued a citation for, a non-criminal ordinance violation, including traffic violations? If so, for each instance provide the case name, case number, and final adjudication of the matter(s). |

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| 18. | Have you ever been a party to a small claims or civil action, excluding probate? If so, for each instance provide the case name, case number, and a brief description of the proceeding and its outcome. |
| 19. | Since your transfer to inactive status, have you exhibited any conduct or behavior that could call into question your ability to practice law in a competent, ethical, and professional manner? |
| 20A. | Do you currently have any condition or impairment (including, but not limited to, substance abuse, alcohol abuse, or a mental, emotional, or nervous disorder or condition) that in any way affects your ability to practice law in a competent, ethical, and professional manner? |
| 20B. | If your answer to Question 20.A. is yes, are the limitations caused by your condition or impairment reduced or ameliorated because you receive ongoing treatment or because you participate in a monitoring or support program? |
| 20C. | Since your transfer to inactive status, have you asserted any condition or impairment as a defense, in mitigation, or as an explanation for your conduct in the course of any inquiry, any investigation, or any administrative or judicial proceeding by an educational institution, government agency, professional organization, or licensing authority; or in connection with an employment disciplinary or termination procedure? |
| 21. | Indicate whether or not you intend to practice law in this jurisdiction and in what area of law you intend to practice, if you are reinstated. |
| 22. | Provide the names, addresses, telephone numbers, and email addresses of five (5) references, preferably attorneys, to whom we can write about your work and reputation as an attorney. |
| 23. | Provide any other information you believe to be pertinent to the consideration of your petition. |

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

 ) SS.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTY )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ being duly sworn, states that: I have read the foregoing questions and that the answers are true as stated, except as to matters and things, if any, stated on information and belief and that as to those matters and things I believe them to be true.

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 Signature

Subscribed and sworn to before me this

\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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Notary Public

My commission \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_