

UNITED STATES DISTRICT COURT
for the EASTERN DISTRICT of MISSOURI
APPLICATION FOR SPECIAL LIMITED ADMISSION BY GOVERNMENT COUNSEL

Please PRINT or TYPE

Name (First , Middle Initial, Last) _____

Date of Birth: _____

REGULARLY ENGAGED IN THE PRACTICE OF LAW AT:

Agency Name: _____

Department/Unit: _____

Address/City/State/Zip: _____

Phone: _____ Ext.: _____ Fax #: _____

Primary Email Address: _____

Secondary Email Address: _____

State/Local Government: Federal Government:

LIST STATE TO WHICH YOU ARE ADMITTED TO PRACTICE LAW:

<u>STATE</u>	<u>YR. ADMITTED</u>	<u>CURRENT STATUS</u>	<u>I.D. NUMBER</u>
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LIST FEDERAL COURTS TO WHICH YOU ARE ADMITTED TO PRACTICE LAW:

<u>COURT</u>	<u>YR. ADMITTED</u>	<u>CURRENT STATUS</u>
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*The applicant shall submit as an attachment a letter on the government agency letterhead, signed by the agency head indicating the applicants name, title, appointment date, and not to exceed date if any.

APPLICANT'S NAME _____

AFFIRMATION

I swear/affirm that the information provided in the foregoing application is true and correct. I acknowledge that by accepting admission to this court I am subjecting myself to the discipline of this court. I further certify that I have read and am familiar with the Federal Rules of Civil Procedure, the Federal Rules of Criminal Procedure, and the Local Rules of this court.

By registering under this rule, attorneys consent to electronic service *by the court* of all documents, including orders and judgments. See Local Rule 5-2.12, Fed.R.Civ.P. 5, Fed.R.Civ.P. 77, and Fed.R.Crim.P. 49.

Date

Signature