



**UTAH STATE BAR**  
 LICENSED PARALEGAL PRACTITIONER  
 EXAMINATION APPLICATION

**Mail or Deliver completed application to:**  
 Utah State Bar  
 LPP Admissions  
 645 South 200 East  
 Salt Lake City, UT 84111

**CONTACT INFORMATION:** Name (Last, First)

Mailing Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Contact Email: \_\_\_\_\_ Primary Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Drivers Licence State and No.: \_\_\_\_\_

**List all other names you have used or been known by, applicable dates, and reason for change:**

Last Name, First Name	From Mo/Year to Mo/Year	Reason for Change
_____ / _____	_____ / _____	_____
_____ / _____	_____ / _____	_____

**MARITAL STATUS:**  Married  Single  Divorced

**FEES:**

\$400 (All Practice Areas and Professional Responsibility);

OR

\$100 for each of the following:

- Family Law Exam
- Debt Collection Exam
- Landlord/Tenant Exam

**AND**

\$100 for Professional Responsibility Exam

[staple]

**Please attach passport-style photo in this box, with staples placed as noted.**

[staple]

**LATE FEE (If applicable)**

\$50/\$100 (Circle \$50 if submitted 1-15 days/\$100 if submitted 15-30 days after filing deadline.)

**TOTAL: \$** \_\_\_\_\_

**METHOD OF PAYMENT:**

Check (Payable to Utah State Bar)

<i>For office use only – LPP Exam Fees</i>	
Date _____	Amount \$ _____
Check No. _____	App. No. _____

<p><b>1. Do you have a disability for which you will need reasonable accommodation in taking the exam?</b></p> <p><i>If you have a condition which necessitates the use of medically-prescribed devices or aids (medication, lactation pump, inhaler, neck brace, wheelchair, crutches, etc.) you will need to <b><u>complete the Courtesy Provisions for Health-Related Conditions form and attach a doctor's note.</u></b></i></p> <p><i>If you are temporarily or permanently disabled and require accommodations affecting the format or administration of the exam, you must request test accommodations using forms A through F. The instructions and forms for making the request can be found on the LPP website. Test accommodation documentation is subject to the same filing deadlines and late fees as the Application.</i></p> <p><i>Your test accommodation request will not be reviewed or granted if you fail to <b><u>file the required forms and medical documentation.</u></b> See General Guidelines for Test Accommodations for specific details.</i></p>	Yes	No
<p><b>2. Have you applied for, or received approval of, a Limited Time Waiver</b></p> <p>If Yes, date of application/approval</p> <p><b>If you have a limited time waiver, or are waiting for approval of your waiver application, you may skip Sections 3 and 4.</b></p>	Yes	No
<p><b>3. Do you have a First Professional Law Degree from an ABA Approved Law School?</b>  <b>If No, please skip to section 4.</b> If Yes, please provide the following documentation:</p> <p>Name of Law School:</p> <p>Month/Year of graduation:</p> <p><i>You must provide a copy of the <b>Certificate of Law School Graduation</b> form to your law school Dean or Registrar for completion and ensure that the Bar receives the completed Certificate by close of business on the filing deadline. The Certificate may be mailed by the school directly to the Bar or it may be mailed to you and forwarded to the Bar.</i></p> <p>Was your law school approved by the American Bar Association when you received your law degree?</p> <p><i>If you have not graduated from an ABA-approved law school, you must meet the education qualifications for an LPP as set forth in Section 4, below.</i></p>	Yes	No
<p><b>4. Educational Requirements</b></p> <p>A. Have you received an Associate's or Bachelor's degree in paralegal studies from an accredited school? <b>If yes, complete section 5. If no, continue to Question B.</b></p> <p>B. Have you received a Master's Degree in legal studies or equivalent that is offered through an Approved Law School?</p> <p>C. Have you obtained the National Certification through NALA, NALS, or NFPA?</p>	Yes	No

<p><b>5. Required Experience</b></p> <p>Have you completed 1500 total hours of <b>substantive law-related experience</b> within the three years prior to this application? <b><i>Please submit a Substantive Law-Related Employment Certification Form as instructed in the Filing Instructions and Information.</i></b></p> <p><b>A. For Family Law Exam Only:</b> Have you completed at least 500 hours of substantive law-related experience in family law (inclusive of the 1500 total hours):</p> <p><b>B. For Debt Collection Exam Only:</b> Have you completed at least 100 hours of substantive law-related experience in debt collection (inclusive of the 1500 total hours):</p> <p><b>C. For Landlord/Tenant Only:</b> Have you completed at least 100 hours of substantive law-related experience in the landlord/tenant area (inclusive of the 1500 total hours):</p>	<p>Yes</p> <p>Yes</p> <p>Yes</p> <p>Yes</p>	<p>No</p> <p>No</p> <p>No</p> <p>No</p>
<p><b>6. National Certification* if necessary</b></p> <p>A. Have you been designated as a Certified Paralegal or Certified Legal Assistant by the National Association of Legal Assistants (NALA)?</p> <p>B. Have you received a Professional Paralegal (PP) Certification from the National Association of Legal Professionals (NALS)?</p> <p>C. Have you received the CORE Registered Paralegal (CRP) designation from the National Federation of Paralegal Associations (NFPA)?</p> <p><b><i>Note: you must successfully pass at least one of the above certifications within the year of being admitted to take the LPP licensing examination. If not completed at the time of your application, please mark "anticipated" in this section.</i></b></p> <p>Type of Certification:</p> <p>Date of Passage (Mo/Day/Yr)</p> <p>Date of Certification (Mo/Day/Yr)</p> <p>Expiration (Mo/Day/Yr)</p> <p><b>If yes, provide the following information and attach documentary proof as required in the <i>Filing Instructions and Information</i>:</b></p>	<p>Yes</p> <p>Yes</p> <p>Yes</p>	<p>No</p> <p>No</p> <p>No</p>
<p><b>7. Licensed Paralegal Practitioner Classes</b></p> <p>A. Have you successfully completed the required LPP Professional Responsibility courses?</p> <p>B. Mark each of the practice areas in which you have completed the required LPP course. If you are enrolled but have not completed the course, please indicate your expected completion date in the space provided below:</p> <p>Family Law</p> <p>Debt Collection</p> <p>Landlord/Tenant</p> <p><b><i>You must provide an official transcript showing completion of each course you have marked above and ensure that the Bar receives the transcript by the application deadline.</i></b></p>	<p>Yes</p>	<p>No</p>



**9. Education**

**A. List complete information regarding your college/university attendance, including institutions at which you studied abroad, in reverse chronological order. Report all legal education and law schools in Question B. If the school's name has changed since your attendance, provide the current and former names. Please indicate the degree received or write "No Degree" if you did not receive a degree. Multiple degrees received from the same school require separate entries, as do multiple periods of attendance (other than those interrupted only by school vacations). Official transcripts for all institutions are required.**

School Name

Address:

City:

State:

Zip Code:

From Mo/Yr

To Mo/Yr

Degree Received (No Degree, A.A., B.A., etc.)

Field(s) of Study

School Name

Address:

City:

State:

Zip Code:

From Mo/Yr

To Mo/Yr

Degree Received (No Degree, A.A., B.A., etc.)

Field(s) of Study

School Name

Address:

City:

State:

Zip Code:

From Mo/Yr

To Mo/Yr

Degree Received (No Degree, A.A., B.A., etc.)

Field(s) of Study

**B. List complete information regarding your attendance at any law schools/colleges/universities where you have studied or are currently studying for your J.D. or first degree in law, including institutions at which you studied abroad, in reverse chronological order. If the school's name has changed since your attendance, provide the current and former names. Please indicate the degree received, or write "No Degree" if you did not receive a degree. Multiple degrees received from the same school require separate entries, as do multiple periods of attendance (other than those interrupted only by school vacations). Advanced degrees in law should be entered in question Official transcripts for all institutions are required.**

Law School

Address:

City: State: Zip Code:

From Mo/Yr To Mo/Yr

Degree received or expected to be received

Law School:

Address:

City: State: Zip Code:

From Mo/Yr To Mo/Yr

Degree received or expected to be received (No Degree, J.D., etc)

**C. List complete information regarding your attendance at law schools/colleges/universities where you have studied or are currently studying for your advanced degree(s), including institutions at which you studied abroad, in reverse chronological order. If the school's name has changed since your attendance, provide the current and former names. Please indicate the degree received or enter "No Degree" if you did not receive a degree. Multiple degrees received from the same school require separate entries, as do multiple periods of attendance (other than those interrupted by school vacations.) Official transcripts for all institutions are required.**

School Name:

Address:

City: State: Zip Code:

From Mo/Yr To Mo/Yr

Degree received or expected to be received (No Degree, LL.M., Ph.D., etc.)

**10. Disciplinary History**

A. Have you ever been investigated for a violation of any policy (academic or non-academic) at a college, university, or law school, whether or not any action was taken against you or whether or not the school agreed to not disclose the incident on your permanent record? Include pending matters and continue on attached pages, if necessary.

Yes

No

If yes, please provide a full explanation. If this occurred within the last 10 years, you must **submit all documentation related to the investigation**, both from your own files and from the school.

Name of Institution:

Type of Action:

Date Action Taken:

Explanation of Circumstances:

B. Have you ever been dropped, suspended, warned, sanctioned, placed on scholastic or disciplinary probation, expelled or requested to resign or allowed to resign in lieu of discipline, been advised to discontinue your studies or otherwise had disciplinary action of any sort taken against you (academic or non-academic) by a college, university, or law school?

Yes

No

If yes, please provide a full explanation. If this occurred within the last 10 years, you must **submit all documentation related to the investigation**, both from your own files and from the school.

Name of Institution:

Type of Action:

Date Action Taken:

Explanation of Circumstances:





**12. Employment History: List your employment and unemployment information for the last five years in reverse chronological order.**

- Employment encompasses all part-time and full-time employment, including self-employment, externships, internships (paid and unpaid), law school clinics, clerkships, military service, volunteer work, and temporary employment whether or not it is law-related. If you were employed by a temporary agency and also note the name of the firm/company to which you were assigned.
- Account for any unemployment period of more than three months (i.e., attending law school, studying for the bar examination, seeking employment, etc.). For these periods of time, **check the box for Unemployment period and describe your activities while you were unemployed in the field labeled Employment Position/Description of unemployment.**
- Do not furnish your own name or the name of someone to whom you are related by blood or marriage as a confirming reference. If you cannot recall the name of your supervisor, so state.
- If an employer is no longer in business, provide the address as it was when you were employed there; instead of a phone number, include a note that it no longer exists.
- If you are self-employed or employed by a relative, provide a reference (preferably someone associated with the business) to whom you are not related by blood or marriage who can verify the nature and length of your employment or practice.
- For 'Reason for Leaving' you must explain your reason for seeking new employment.

**CURRENT EMPLOYMENT**

From Mo/Yr \_\_\_\_\_ To PRESENT  
Employment Position/Description of Unemployment \_\_\_\_\_  
Name of Employer \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Employer E-Mail \_\_\_\_\_

**PAST EMPLOYMENT**

From Mo/Yr \_\_\_\_\_ To Mo/Yr \_\_\_\_\_  
Employment Position/Description of Unemployment \_\_\_\_\_  
Name of Employer \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Employer E-Mail \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_







<p><b>17. Have sanctions ever been entered against you, or have you ever been disqualified from participating in any case?</b></p> <p>If you answered yes, please provide the following for each sanction or disqualification:</p> <p>Name of Court _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Province _____ Country _____</p> <p>Action Taken _____</p> <p>From Mo/Yr _____ To Mo/Yr _____</p> <p>Reason for the sanction or disqualification _____</p> <p>_____</p> <p><b>Attach a copy of the order of sanction or disqualification.</b></p>	Yes	No
<p><b>18. Have you ever held judicial office?</b></p> <p>If yes, provide the following information about each office:</p> <p>Office Held _____ From Mo/Yr _____ To Mo/Yr _____</p> <p>Name of Court _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Reason for leaving Office _____</p> <p>_____</p>	Yes	No
<p><b>19. Have you ever been a member of the armed forces of the United States, its reserve components, or the National Guard?</b></p> <p>If yes, complete a separate <b>FORM 1 Record of Military Service</b> for each period of service.</p>	Yes	No

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<p><b>25. A. Have you ever been cited for, arrested for, charged with, or convicted of any alcohol or drug-related traffic violation, including any cases resolved in juvenile court?</b></p> <p>If yes, complete a separate <b>FORM 4 Record of Criminal Cases</b> for each incident.</p> <p><b>B. Have you ever been cited for, arrested for, charged with, or convicted of any moving traffic violation during the past five years? (Omit parking violations.)</b></p> <p>If yes, report each incident on <b>FORM 4T Record of Moving Traffic Violations</b>.</p>	Yes	No
<p><b>26. Have you ever been cited for, arrested for, charged with, or convicted of any violation of any law, including any cases resolved in juvenile court? (Do not include traffic violations disclosed in question 26.)</b></p> <p>If yes, complete a separate <b>FORM 4 Record of Criminal Cases</b> for each incident.</p>	Yes	No
<p><b>27. Have you ever filed a petition for bankruptcy?</b></p> <p>If yes, complete a separate <b>FORM 5 Record of Bankruptcy or Insolvency</b> for each bankruptcy petition filed.</p> <p>See also Question 28C.</p>	Yes	No
<p><b>28. A. Have you ever defaulted on any student loans?</b></p> <p><b>B. Have you ever defaulted on any other debt?</b></p> <p><b>C. If you answered yes to Question 27, are there any additional debts not reported in Questions 28(A &amp; B) that were not discharged in bankruptcy?</b></p> <p>If you answered yes to 28A, 28B, and/or 28C, complete a separate <b>FORM 6 DEBTS: Defaults; Past Due; Revocations</b> for each debt.</p> <p><b>28. D. Have any tax liens ever been placed against your personal or business property?</b></p> <p>If you answered yes to 28D, complete a separate <b>Form 6T: Record of State and Federal Tax Liens</b>.</p>	Yes  Yes  Yes  Yes	No  No  No  No

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<p><b>30. Within the past five years, have you been confronted, questioned, warned, or asked or encouraged to resign or withdraw by an employer, supervisor, teacher or other educator based on:</b></p> <ul style="list-style-type: none"> <li>a) your truthfulness,</li> <li>b) your excessive absences,</li> <li>c) the manner in which you handled or preserved the money or property of others,</li> <li>d) a serious or repeated failure to submit your work in a timely manner,</li> <li>e) your competence or diligence in the performance of job or academic duties,</li> <li>f) your ability to maintain the confidentiality of information, or</li> <li>g) your endangering the safety of others?</li> </ul> <p>If you answered yes, complete the following section. You may include information regarding all defenses or claims that you wish to offer in mitigation or as an explanation for your conduct.</p> <p>Name of entity before which the issues were raised (i.e., employer, school, etc.):</p> <p>Address</p> <p>City, State, Zip</p> <p>Province, Country</p> <p>Telephone</p> <p>Nature of the issue</p> <p>Relevant Dates</p> <p>Disposition, if any</p> <p>Explanation</p> <p><i>Use additional pages if necessary.</i></p>	Yes	No
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**31. Other Conduct Relevant to the Practice of Law**

*In completing this section, consider not only your own views of your behavior, but how others have viewed it. For example, if you believe that the answer to number 31A is 'No', but others have told you that you have trouble communicating, you should answer 'Yes' and explain the circumstances.*

*These questions are your opportunity to show the Character and Fitness Committee that you understand the qualifications necessary to be an ethical Licensed Paralegal Practitioner. It is also your opportunity to consider your past actions and behaviors and the bearing they might have on your character and fitness to practice law.*

*Examples provided in parentheses are meant as a guide; they are not exclusive.*

A. Have you ever or do you currently have difficulty communicating with others in an organized, clear, and professional manner? If yes, complete **FORM 7 Record of Conduct**

Yes No

B. Have you ever or do you currently struggle to act diligently and reliably in fulfilling your obligations to others? (Examples: failing to comply with deadlines or time constraints, frequent or excessive work absences, etc.) If yes, complete **FORM 7 Record of Conduct**

Yes No

C. Have you ever or do you currently fail to conduct your business, fiduciary and financial dealings in an honest, trustworthy and competent manner? If yes, complete **FORM 7 Record of Conduct**

Yes No

D. Within the last five years have you used illegal drugs or substances, or prescription medications without the authorization or supervision of a licensed health care professional, or in a manner contrary to the health care professional's recommendations? If yes, complete **FORM 7 Record of Conduct**

Yes No

E. Within the last five years have you conducted yourself in such a manner as to endanger the health or safety of yourself or others? (Examples: suicide attempts, reckless driving, substance abuse.) If yes, complete **FORM 7 Record of Conduct**

Yes No

F. Do you have a current condition or impairment (including, but not limited to, substance abuse, alcohol abuse, or a mental, emotional, or nervous disorder or condition) which has not been or is not currently being treated effectively or for which the treatment is unstable? If yes, complete **FORM 7 Record of Conduct**

Yes No

