

**Declaration Form to be submitted by
the Advocates enrolled after July, 2010**

Passport size
Photograph
of Advocate

1. Name _____
2. Father's Name _____
3. Present Address _____

4. Enrolment Number and Date _____
5. Place of Practice _____
6. When did you pass your AIBE? _____
AIBE No. _____ (attach the copy of CoP)
7. Name of Bar Association/Place where you want to cast your vote in the election of
Bar Association _____
8. Place where you intend to cast your vote in the elections of State Bar Council

9. Whether; after getting enrolled you are in practice or have joined some job,
business, etc. (give details) _____

To be continued.....

10. If you have not passed the AIBE within two years of your enrolment, whether you have left practice and informed your Bar Association and State Bar Council? (give details) _____

11. Details of qualification

Sl. No.	Name of the Board/University	Roll No.	Year of Passing
A.	Secondary Exam		
B.	Senior Secondary/ Intermediate (+2)		
C.	Graduation		
D.	LL.B.		

I do hereby declare that all the informations given above are true and correct. If any of the informations are found to be false, then I will be liable to be prosecuted under the Criminal Law.

Recommended By

Signature of Candidate

**Signature of President/Secretary/Office-bearer
Of the Association
(or the Authorised signatory of B. C. I.)
Seal of Bar Association**

Date:

Note: One extra photograph to be attached also.