

National College for DUI Defense, Inc.

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Annual Affidavit of Conduct ¹

I, _____, being duly sworn, depose and state that
PRINT OR TYPE NAME
to my best personal knowledge (Please check all applicable boxes):

- No criminal charges have been filed against me which have not been previously disclosed in writing to the College.
- No allegations of unethical or inappropriate professional conduct have been filed against me with any court, grievance committee, or other disciplinary board or body which have not been previously disclosed in writing to the College.
- No claim of professional negligence or other professional liability has been asserted against me (with or without the filing of suit) based in any part on my acts or omissions, or on those of any other attorney over whom I have supervisory responsibility.
- My law license has not been suspended or revoked in any state or in the District of Columbia.
- I have maintained my status as being in good standing in every state in which I am licensed.

If you cannot check all of the above, please attach a detailed explanation of the matter. The National College for DUI Defense, Inc. (NCDD) may request additional information bearing on the matter, and shall determine whether the circumstances are such that the attorney should have his or her certification suspended or revoked, or whether the NCDD should either take no action, or defer action pending receipt of further information. This disclosure should include material that would not otherwise be disclosed to the public in your state, unless disclosure to the NCDD is prohibited by state law and cannot be waived.

¹ This document should only be completed by those who are currently Board Certified and whose Board Certification is not currently being considered for the five-year renewal.

The failure to promptly disclose the requested information is a material misrepresentation, and may be cause for refusing to grant certification renewal, or for revoking or suspending current certification. Affiant understands, and attests by his or her certification below, that he or she has a continuing duty to disclose promptly to the Board of Regents any such matters listed above which may arise, and acknowledges that a person holding Board Certification by the NCDD has a continuing duty to report such information. Failure to promptly report may, by itself, be cause for revocation or suspension of certification.

Affirmation of Contents

I have personally reviewed all of the above information and hereby swear, affirm, and declare under penalty of perjury that the above information is complete, true, accurate, and correct.

Signature of Applicant: _____

The undersigned, a Notary Public in and for the County of _____, in the State of _____, certifies that _____

APPLICANT NAME

appeared in person, and before me SUBSCRIBED and SWORE to the above Annual Affidavit of Conduct, under penalties for perjury, this _____ day of _____, 20____, and to which witness my hand and seal.

Notary Public

Stamp or Seal

Printed Name

My commission expires _____, 20_____.

PAYMENT INFORMATION

____ Enclosed find a check for \$250.00 for the recertification fee made payable to:

The National College for DUI Defense, Inc.

Charge \$250.00 to my:

____ Visa #: _____ Exp. Date _____

____ MasterCard #: _____ Exp. Date _____

____ Amer. Express #: _____ Exp. Date _____

Signature (for credit cards only) _____

Billing Address for Credit Card:

