UNITED STATES DISTRICT COURT



WESTERN DISTRICT OF WASHINGTON
OFFICE OF THE CLERK
U.S. COURTHOUSE
700 STEWART STREET, SUITE 2310
SEATTLE, WASHINGTON 98101
(206) 370-8400

RAVI SUBRAMANIAN
District Court Executive
Clerk of Court

ERIC SMITS
Chief Deputy Clerk

INSTRUCTIONS FOR COMPLETION OF PETITION FOR CONDITIONAL ADMISSION TO PRACTICE

Complete and return the fillable Petition for Conditional Admission to Practice, which includes:

- Petition to Practice.
- Self-administered Oath of Attorney, (signed and dated by the Petitioner as an Officer of the Court).
- Verification required by Western District of Washington Assistant US Attorney.
- Court's Electronic Case Filing (ECF) system Agreement.

Submit completed Petition for Conditional Admission to Practice by uploading to pacer.gov as directed on the <u>Conditional Admissions</u> page (see Conditional Admissions Guide).

Upon successful review of the Petition for Conditional Admission to Practice, an admission confirmation will be emailed, followed by a Certificate of Admission.

For questions, please contact the attorney admissions clerk.

Attorney Admissions Clerk Phone: 206-370-8433

E-mail: WAWD_Admissions@wawd.uscourts.gov

PETITION FOR CONDITIONAL ADMISSION TO PRACTICE

COMES NOW	_, a member in
good standing of the bar of (include bar number and state)	,
and respectfully petitions the Court, pursuant to Local Civil Rule (LCR) 83.1(c)(2), for conditional
admission to practice before the Bar of this Court as an employee of the	Federal Public
Defender's Office. In support of said petition, the Petitioner states as follows:	
Petitioner's residence address is:	
Petitioner's home telephone is:	
Petitioner's is currently employed by (name of agency):	
Agency Address:	
Agency phone number is:	
Agency e-mail address is:	
Petitioner's general and legal education are as follows:	

US District Court – Petition for Conditional Admission Revised: November 20, 2023

From the time of Petitioner's admission to the bar of _	
(as indicated above) on	(date), Petitioner has been
engaged in the practice of law at (agency name and address	s):
Petitioner seeks conditional admission, pursuant	to Local Civil Rule LCR 83.1(c)(2),
as an attorney for the Federal Public Defender's Office	e. The circumstances necessitating
Petitioner's conditional admission to the Bar of this Court are	as follows:
Verification that Petitioner is an attorney for the Feder	ral Public Defender's Office by

Verification that Petitioner is an attorney for the Federal Public Defender's Office by the Federal Public Defender for this District is attached.

Petitioner certifies that he/she has read and is familiar with the Federal Rules of Civil and Criminal Procedure and the Local Rules of this Court.

WHEREFORE, Petitioner herein respectfully petitions that he/she be conditionally admitted to practice before the Bar of the United States District Court for the Western District of Washington.

OATH OF ATTORNEY

I solemnly swear that I will support and defend the Constitution and the laws of the United States of America against all enemies, foreign and domestic; that I will and faithfully discharge my duties as a lawyer, counselor, and proctor of this Court; and that I will maintain the respect due to the courts of justice and judicial officers and I will demean myself uprightly and accordingly to law and recognized standards of ethics of the legal profession. Petitioner herein, being first duly sworn, on oath deposes and says: That he/she has read the foregoing petition and that the facts stated therein are true of Petitioner's own knowledge. I, _____, declare under penalty of perjury under the laws of the State of Washington and the United States, that the foregoing is true and correct to the best of my knowledge and belief. DATED this _____ day of _____ 20__. Petitioner's Signature Bar No.

VERIFICATION OF FEDERAL PUBLIC DEFENDER

I,	, hereby verify that	
am the Federal Public Defender for the West	ern District of Washington.	
I verify that	is an Attorney at the	
Federal Public Defender's Office.		
DATED at	, Washington this day of	
,	20	
	Federal Public Defender	



ATTORNEY REGISTRATION FORM for the ELECTRONIC CASE FILING SYSTEM (CM/ECF)

Last Name:	First Name:	Middle :
Attorney Bar # and State:		
By submitting this registration form	, the undersigned understands and agrees to the follo	owing:
1. The CM/ECF system is to be use	d for filing and reviewing electronic documents, docke	et sheets, and notices.
	with your login, serves as your signature under Feder oonsible for protecting and securing this password ag	
	t that your password has been compromised in any vill assess the risk and advise accordingly.	way, you are responsible for immediately
personal service or first-class n	n, you consent to receive notice electronically and nail pursuant to Federal Rule of Civil Procedure 5(kg provision does include electronic notice of the entry	b)(2)(C), except with regard to service of
Court Electronic Records (PACER	information via the Western District of Washington's system. After January 27,2020, a PACER login and process at their web site: www.pacer.gov.	
	n, the undersigned agrees to abide by the rules and r dures developed by the Clerk's Office, and any chang future.	
Signa	ture (Type "s/" and your name)	Date Signed