VIRGINIA:

In the Supreme Court of Virginia held at the Supreme Court Building in the City of Richmond on Thursday the 21st day of January, 2016.

It is ordered that the Rules heretofore adopted and promulgated by this Court and now in effect be and they hereby are amended to become effective immediately.

PART TEN

PROVISION OF LEGAL SERVICES FOLLOWING DETERMINATION OF MAJOR DISASTER

* * *

Add the following forms to read as follows:

Form 1. Registration Statement For Lawyer Engaging In Temporary Practice Following Determination Of Major Disaster.

IN THE SUPREME COURT OF VIRGINIA

REGISTRATION STATEMENT FOR LAWYER ENGAGING IN TEMPORARY PRACTICE FOLLOWING DETERMINATION OF MAJOR DISASTER

Pursuant to Virginia Supreme Court Rule 10(f), the undersigned shall complete the following and file it with the Clerk of the Supreme Court of Virginia, 100 North 9th Street, 5th Floor, Richmond, Virginia 23219 within 30 days of the commencement of the provision of legal services. The attorney's oath must be administered by a <u>Judge or Justice of a court of record</u>.

1. Name		
Lawyer's full name.		
Name of lawyer's firm.		

Lawyer's residential address in home state.
Lawyer's business address in home state.
Lawyer's telephone number in home state.
Lawyer's e-mail address.
3. Virginia Information Lawyer's residential address in Virginia.
Lawyer's business address in Virginia.
Lawyer's telephone number in Virginia.
Lawyer's email address.
4. Bar admission List the courts before which you have been admitted to practice, the respective periods of admission, and your registration or bar numbers.

2. Home State Information

Is your license to practice currently subject to disbarment, suspensio jurisdiction?	n, or restrictions in any
[] Yes [] No	
If yes, explain the proceedings on a separate page and attach copies	of all related documents.
5. Temporary Practice Following Determination of Major Disas	ster
(Check all that apply)	
Specify whether you will engage in temporary practice pursuant to:	
[] Virginia Supreme Court Rule 10(b) (pro bono legal services)	
[] Virginia Supreme Court Rule 10(c) (legal services reasonably relaw in jurisdiction or area where the disaster occurred)	lated to lawyer's practice of
I agree that I am subject to the disciplinary authority of Virginia and Professional Conduct, as set forth in Rule 8.5 of the Virginia Rules of	_
[] Yes [] No	
ATTORNEY CERTIFICATION	
I certify under penalty of perjury and pursuant to the laws of the that the preceding is true and correct. I also certify under penalty of required attorney oath and have attached the motion and oath docum Justice of a court of record who administered the oath.	perjury that I have taken the
I certify under penalty of perjury and pursuant to the laws of the that I am licensed and in good standing and authorized to practice la above and my license is not subject to suspension or restriction in an	w in each jurisdiction listed
DATE	SIGNATURE

Form 2. Motion And Oath For Temporary Admission After Major Disaster.

TEMPORARY ADMISSION FOR FOREIGN LAWYERS AFTER MAJOR DISASTER (MOTION)

I WISH TO PRESENT	,
A MEMBER OF THE BAR OF THE STATE OF _	
(OR THE DISTRICT OF COLUMBIA), WHO IS E	ELIGIBLE TO PRACTICE
LAW IN THE COMMONWEALTH OF VIRGINIA	A ON A TEMPORARY
BASIS PURSUANT TO RULE 10 OF THE RULES	S OF THE SUPREME
COURT OF VIRGINIA AND THE DETERMINAT	TION BY THE CHIEF
JUSTICE THAT A MAJOR DISASTER AFFECTIVE	NG THE JUSTICE
SYSTEM HAS OCCURRED. I NOW MOVE HIS	HER TEMPORARY
ADMISSION AS COUNSEL, PURSUANT TO RU	LE 10, TO THE BAR OF
THE SUPREME COURT OF VIRGINIA.	
Signature of Sponsor	
Printed Name of Sponsor and Virginia Bar Number	-
Signature of Judge Administering Oath	
Printed Name of Judge Administering Oath	
Name of Court	Date

I do solemnly swear or affirm that I will support the Constitution of the United States an	d
he Constitution of the Commonwealth of Virginia, and that I will faithfully, honestly,	
professionally, and courteously demean myself in the practice of law and execute my office of	
attorney at law to the best of my ability, so help me God.	
Print Full Name)	
(Signature)	
(Address)	
(Phone)	
Sponsor's Name and Virginia bar number:	
#	
A Copy,	
Teste:	
Clerk	