

State of Maine
Office of Judicial Marshals
Attorney application for Maine Judicial Branch Identification Card

Maine Bar No: _____

Last Name: _____ First Name: _____ Middle: _____

Gender: ____ Date of Birth: _____ Email: _____

Home Address: _____ Home Phone: _____

Law Firm Name: _____

Law Firm or Work Address: _____

Work Phone: _____

I certify that the information provided on this application is correct and complete to the best of my knowledge. I further certify that I understand and acknowledge the following: (1) I have read and agree to comply with all provisions set forth in Administrative Order JB-15-2 and all other accompanying paperwork. (2) I must submit to a criminal history background check performed by the Office of Judicial Marshals by completing and submitting the form provided as part of this application. (3) I am an attorney licensed to practice law in the State of Maine, and I am in good standing with the Board of Overseers of the Bar. (4) I must submit a nonrefundable application fee of \$100.00 (check payable to Treasurer, State of Maine). (5) If approved, the identification card must be renewed after a period of two years upon presentation of a renewal application by submitting the forms provided as part of this application and payment of a \$25.00 renewal fee. (6) The identification card is nontransferable; and (7) The Judicial Branch reserves the right to cancel or modify the terms of use at any time.

Applicant Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Date received: _____ By: _____

Application Fee paid: ____ Y/N Cash/Check: _____ Receipt issued: ____ Y/N

Background check submitted: ____ Y/N Release of Information Form: ____ Y/N
(DHHS/Concealed firearm)

Date submitted to OJM: _____ Date approved/denied by OJM: (Circle which)

Card issued by: _____ Date: _____

Date Card returned/suspended/revoked (Circle which) Received by: _____