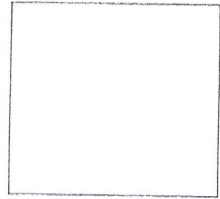


Particulars to be furnished by an Advocate applying for engagements as Standing Counsel along with documentary proof.



1. Name of the Advocate: _____
2. Father's Name: _____
3. Permanent Address: _____
4. Date of Birth: _____
5. Address for Correspondence including e-mail, Telephone/Mobile No.

6. Education Qualification _____
7. Date of enrolment as an Advocate in the State Bar Council and Registration No.

8. Place of Practice _____
9. Experience as an Advocate _____ years.
10. Category of Counsel for which applied _____ Court _____
11. Number of cases dealt with during last 2 years as an Advocate _____
12. Number of cases published in Journals/Newspapers, etc and the details thereof

13. Income from Professional Practice _____

ly. Incom Tax Return, if required, any
Verification

I _____, S/o _____, R/o _____

do hereby declare that whatever has been stated in the above application is true to the best of my knowledge and belief.

Signature of the Applicant

Date: _____

Place: _____

Undertaking

I _____ S/o _____, R/o _____ do

hereby declare that if engaged by the Department as Standing Council, I shall fully abide by the terms and conditions of the engagement.

Signature of the Applicant

Date: _____

Place: _____