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The North Carolina State Bar
Board of Paralegal Certification

Application for Paralegal Certification Exam on October 6, 2012

208 Fayetteville St., PO Box 25908
Raleigh, NC 27611, (919) 828-4620

**The North Carolina State Bar
Board of Paralegal Certification
Application for Paralegal Certification Exam**

Instructions and Information for Applicants

Please read and follow these instructions before completing this application.

1. **READ** the North Carolina Plan for Certification of Paralegals. These materials are found at 27 N.C.A.C.1G, Sect.0100 *et seq.* and are published in *The North Carolina State Bar Lawyer's Handbook*.

2. **FILING FEE**—A filing fee of \$125.00 must accompany this application. All checks should be payable to the North Carolina State Bar Board of Paralegal Certification. Any check returned for insufficient funds will be subject to a \$35.00 fee in addition to requiring a certified check prior to processing the application. Rejection or withdrawal of an application will not entitle an applicant to a refund of the fee or any part of the fee.

3. **FILING TIME PERIOD**—The application shall be considered timely filed if the application is delivered to the office of the North Carolina State Bar before 5:00 p.m. on July 2, 2012, or is postmarked no later than July 2, 2012.

4. **PROCESSING OF APPLICATIONS**—A notice showing the date of filing will be sent to each applicant. Only completed applications will be reviewed by the Board of Paralegal Certification (“board”). Each applicant will be notified of the acceptance or rejection of his or her application to sit for the exam.

5. **COMPLETED APPLICATIONS**—All completed applications should be mailed to Director, The North Carolina State Bar Board of Paralegal Certification, PO Box 25908, Raleigh, NC 27611.

6. **VERIFICATION OF APPLICATION**— All applications must be signed by the applicant in front of a Notary who performs the notarial act. If an applicant is unable to obtain verification due to extenuating circumstances, the applicant may request that the board waive this requirement for good cause shown.

7. **EXAMINATION FEE**— Please note there will be an examination fee in the amount of \$50.00 that will be due **TWO WEEKS** prior to taking the examination. Please **DO NOT** send the examination fee until directed to do so. All checks should be payable to the North Carolina State Bar Board of Paralegal Certification. Any check returned for insufficient funds will be subject to a \$35.00 fee in addition to requiring a certified check prior to exam admittance. Failure of the exam will not entitle an applicant to a refund of the fee or any part of the fee.

8. **SPECIAL TESTING ACCOMODATIONS**— Applicants requesting special testing accommodations for a disability or for any other reason must submit a written request and provide supporting documentation. It must be submitted by July 2, 2012. Requests should be addressed to the Board’s Director.

**The North Carolina State Bar
Board of Paralegal Certification
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Filed: _____
(For Office Use Only)

File number: _____
(For Office Use Only)

I. PERSONAL INFORMATION

Full name: Miss Mrs. Ms. Mr. _____
(Circle one) (First) (Middle) (Last) (Maiden)

Name as you would like it to appear on your certificate: _____

Mailing address: _____
(Street/PO Box) (City) (State) (Zip)

Telephone numbers (Office): _____ (Fax): _____

(Home): _____ (Cell): _____

E-Mail address: _____

Are you a legal resident of the United States? Please circle - Yes or No

List any criminal conviction (not traffic infractions) that you have received or that is currently pending.
(If conviction was under a different name, list that name.) Also, please attach a letter of explanation and any criminal record reports you have in your possession.

Type of Conviction	Jurisdiction	Date	Name (if different from above)

II. EDUCATION

A. High School

Name of school _____ Location _____

Year diploma received _____

B. Associate, Bachelor, and Post Graduate Degrees

Complete the following information for each degree obtained. (*List paralegal degrees under section C below.*)

Full Name/Location of School	Degree Obtained	Subject Matter	Date

C. Paralegal Studies Programs

Complete the following information for each *paralegal degree* obtained.

Full Name/Location of School	Degree/Certification Obtained	Date

D. Attach an official transcript from the paralegal institution where you obtained a degree.

The transcript should be in a sealed envelope. The seal of the envelope should bear the signature of the school's registrar.

IV. LAW LICENSES

Complete this section only if you have earned a degree from an ABA accredited law school.

1. Have you ever been licensed to practice law? If so, state where and when you were licensed.

2. If your law license has ever been suspended or revoked, state the reason for the suspension or revocation, the name of the entity taking such action, the date of the action, and the reason therefore.

ACKNOWLEDGMENT OF APPLICANT

- I have read the rules of the board and the standards for certification of paralegals. I agree to comply with the rules and regulations of the board and the standards.
- I consent to a confidential inquiry of third parties by the board for the purpose of determining whether I fulfill the requirements for certification.
- If granted a paralegal certificate by the Board of Paralegal Certification, I agree to surrender the certificate if the certificate is revoked by the board.
- I agree to pay all fees required by the board when due.
- I understand the period of certification is one (1) year. If I become a certified paralegal and desire to continue my certification, I must comply with the standards regarding continued certification as a paralegal.
- I affirm the contents of this application and its attachments, and I affirm that the material representations of my education set forth herein are true and correct.
- I am enclosing my check for \$125.00 as the application fee. I understand this fee is nonrefundable regardless of the disposition of my application.

I, _____, solemnly swear or affirm under penalty of perjury that the
 (Print or type full name)
 information in this application is true, complete and correct.

This the _____ day of _____, 20_____.

 Print or type full name

Signature: _____

NOTARY OATH¹

Sworn to (or affirmed) and subscribed before me
 this _____ day of _____, 20_____

(Official Seal or Stamp)

Signature of Notary Public: _____

Printed Name of Notary Public: _____

My Commission Expires _____, 20_____

*** * Please circle your preferred testing location * ***

Asheville Charlotte Greensboro Greenville Raleigh

RETURN TO: Director, The North Carolina State Bar Board of Paralegal Certification,
 PO Box 25908, Raleigh, NC 27611

¹ N.C.G.S. § 10B-35. Official signature. When notarizing a paper record, a notary shall sign by hand in ink on the notarial certificate. The notary shall comply with the requirements of G.S. 10B-20(b)(1) and (b)(2). The notary shall affix the official signature only after the notarial act is performed. The notary shall not sign a paper record using the facsimile stamp or an electronic or other printing method. (2005-391, s. 4; 2006-59, s. 15.)

Confidentiality Pledge

I understand that the questions on the paralegal certification examination are confidential and that maintaining the confidentiality of the questions on the examination is my professional responsibility. Therefore, I understand and agree to the following:

- I will not divulge the contents of any examination question to anyone; provided, however, I may describe the examination generally (e.g., subject matter covered, types of questions, etc.) to any interested person.
- While taking the examination, I will not memorize any examination question for the purpose of disclosing such question to any interested party.
- I will not write down any examination question recalled from memory following the administration of the examination.
- If I pass the certification examination, I will not be permitted to review the graded examination.
- If I divulge the contents of any examination question in violation of this pledge, my certification as a paralegal may be suspended or revoked, and I may be prohibited from taking the paralegal certification examination at any time in the future.
- I will not participate in the planning, preparation or teaching of a review course for North Carolina State Bar exam for paralegal certification for one year from the last viewing of the exam.

This the _____ day of _____, 20 _____.

Print or type full name

Signature: _____