

CHECKLIST FOR REINSTATEMENT APPLICATIONS
FROM DISABILITY INACTIVE STATUS
Rule 63(i) and 65, Ariz. R. S. Ct.

Required Documentation:

- ✓ Application filing fee enclosed.
- ✓ General Release form enclosed.
- ✓ Affidavit from the Administrator of the Client Protection Fund – verification of payment of any sums owed to the client security fund.
- ✓ Affidavit from the Lawyer Regulation Records Manager – verification of payment of advance costs for investigation.
- ✓ List of the name and address of each psychiatrist, psychologist, physician, hospital or other institution who treated applicant.
- ✓ Written authorization from each person listed above to release information relating to the disability.

Application:

- 1) Name, age, residence and address
- 2) Facts and circumstances surrounding the Transfer to Disability/Inactive Status
- 3) Description of rehabilitative treatment
- 4) Description, dates and duration of each occupation for the period of disability with names and addresses of all partners, associates, employers
- 5) Approximate monthly earnings during the disability and other income, include the source
- 6) All residences with names and addresses of landlords
- 7) Financial obligations with dates, names and addresses
- 8) All civil actions with names, dates and addresses
- 9) Any arrests with details
- 10) Any applications for licenses with details
- 11) Proceedings regarding other professional standings
- 12) Any fraud charges
- 13) Statement in support
- 14) Application verified

Additional Supporting Documentation:

- ✓ Copies of Hearing Officer/Committee reports, Commission reports and any Court orders relating to the disability proceedings
- ✓ Copies of prior applications with reports and orders, if any
- ✓ Copies of all federal and state income tax returns for period out of active practice

Incomplete Applications will not be accepted for filing.