

**BAR COUNCIL OF THE STATE OF ANDHRA PRADESH :: AMARAVATI**  
**ACKNOWLEDGMENT**

No. :

Received Enrolment Application from Mr / Ms.....

.....

on ..... Acceptance is subject to Verification.

For Secretary, Bar Council

✂-----✂

**BAR COUNCIL OF THE STATE OF ANDHRA PRADESH :: AMARAVATI**  
**ACKNOWLEDGMENT**

No. :

Received Enrolment Application from Mr / Ms.....

.....

on ..... Acceptance is subject to Verification.

For Secretary, Bar Council

A

From:

Name:

\*Address:

(Place of Practice)

To

The Secretary,

Bar Council of Andhra Pradesh,

AMARAVATI.

Sir/Madam,

I intend to enroll myself as an advocate on Dt. \_\_\_\_\_ I request you to  
issue me an identity card after my enrolment.

Thanking you,

Yours faithfully,

AMARAVATI:

Date:

B

From:

Name:

S/o. / D/o.

Address:

To

The Commissioner and Inspector – General

Registration & Stamps,

Andhra Pradesh,

AMARAVATI.

Sir,

Sub: - Enrolment as Advocate – Issue of Adhesive Stamps of Rs.500/- Regarding.

I am herewith paying Rs.500/- (Rupees Two hundred and Fifty only) and request you to kindly issue me the necessary adhesive stamps worth Rs.500/- for my enrolment as an advocate.

Thanking you,

Yours faithfully,

AMARAVATI:

Received Stamps.

Date:

Signature of the Candidate

F

From :

Name :

Address:

To

The Secretary,

Bar Council of the State of

Andhra Pradesh, AMARAVATI.

Sir/Madam,

I have passed my Law Degree Examination held on \_\_\_\_\_  
Of \_\_\_\_\_ University at \_\_\_\_\_ and I  
have not received the Law Degree Certificate from the said University and so I could not  
produce the Certificate.

I hereby undertake to produce a true Copy of the Law Degree Certificate as soon as I  
obtain the same from the University, immediately after the Convocation.

Thanking you,

AMARAVATI:

Yours faithfully,

Date:

The Bar Council of the State of Andhra Pradesh,  
AMARAVATI

No.

FORM NO.8

APPLICATION FOR ENROLMENT AS ADVOCATE UNDER  
SECTION 24 OF THE ADVOCATES ACT, 1961  
AND UNDER RULE 75 OF THE RULES OF THE BAR COUNCIL  
OF THE STATE OF ANDHRA PRADESH

Affix  
Passport Size  
photograph duly  
attested by an Advocate  
or Gazetted Officer

INSTRUCTIONS TO APPLICANTS

1. (") Score out which is not applicable and initial the same.
2. (@) Original certificate of Degree in law will be returned after verification if a true copy duly attested by Gazetted Officer is furnished by the applicant. A certificate of a University having passed the Law Degree Examination shall be duly signed and sealed,
3. (%) State particulars of any connection with a firm, joint family firm or a company or corporation, as well as details.
4. (+) Enclosed necessary proof of support.
5. (=) If there is any conviction or adjudication, particulars thereof should be furnished.
6. All particulars required should be given in full. Documents wherever necessary should be produced. All answers should be specific.

Name of applicant \_\_\_\_\_

(In full in block letters, surname first)

Name of applicant as entered in the University Law Degree Certificate:

\_\_\_\_\_

Address:

Permanent \_\_\_\_\_

Temporary/Present \_\_\_\_\_

To

THE BAR COUNCIL OF THE STATE OF ANDHRA PRADESH,  
HIGH COURT PREMISES, AMARAVATI-522 237.

I \_\_\_\_\_

Son/daughter of \_\_\_\_\_ do hereby declare that I am desirous of being admitted as an advocate on the Roll of Advocates maintained by the Bar Council of the State of Andhra Pradesh and beg to apply for the same.

1. I hereby declare that.

I am a citizen of India-

I am a national of \_\_\_\_\_ where citizens of India duly qualified are permitted to practice Law.

2. I hereby declare that I have completed twenty-one years of age, my date of birth being \_\_\_\_\_19\_\_\_\_\_ (copy of the date of birth certificate to be filed)

3. I declare that upon admission I propose to practice within the State of Andhra Pradesh at \_\_\_\_\_

4. I am qualified to be admitted as an Advocate on the State Roll under Clause (c) of Sub-section (1) or subsection (2) or sub-section (3) or sub-section (4) of section 24 of the Advocate Act 1961 (no. 25 of 1961) (Necessary Certificate should be filed)

5. I beg to furnish the details necessary under Section 24(1)(c) of the Advocates Act 1961 read with the relevant rules of the Bar Council of India and the Bar Council of the State of Andhra Pradesh.

**A**

IF A GRADUATE

- (i) The college where the degree in Arts/Science/Commerce was taken and the name of the University\_\_\_\_\_
- (ii) The year in which it was taken \_\_\_\_\_
- (iii) The name of the degree \_\_\_\_\_
- (iv) The medium of instruction in the said course \_\_\_\_\_

If it is not in English whether English was one of the compulsory subjects\_\_\_\_\_

\_\_\_\_\_

If it is not so, whether he/she had passed in the examinations or test for proficiency in English.

- (v) Copy of Degree Certificate duly attested by Gazetted Officer to be filed\_\_\_\_\_

IF NOT A GRADUATE ( Intermediate, +2 or Equivalent )

- (i) The other academic qualification, if any, equivalent to a degree as prescribed by the Bar Council of India under Section 24(1) (c) (iii) or (iv) of the Advocates Act,  
\_\_\_\_\_
- (ii) The medium of Instruction in the said course \_\_\_\_\_



**C**

I hold a degree in law of a University outside the territory of India which is recognized by the Bar Council of India, and the particulars are given below.

- (i) The name of the University \_\_\_\_\_
- (ii) The name of the degree \_\_\_\_\_
- (iii) The year in which it was taken \_\_\_\_\_
- (iv) Name of the Country and Place of University \_\_\_\_\_  
\_\_\_\_\_

**D**

I am a Barrister at law called to Bar in the year \_\_\_\_\_  
and qualified under section 24 (1)(c)

I studied in the Inn \_\_\_\_\_ In  
the year \_\_\_\_\_ (Certificate should be filed)

- 6. Particulars regarding practical training if any, undergone during 3/5 years course of study. As per the syllabus of \_\_\_\_\_ University \_\_\_\_\_
- 7. I enclosed Original Certificates and diplomas and furnish true copies of the originals duly attested by Gazetted Officer. (Particulars to be furnished)

**NATURE OF THE CERTIFICATE**

- (i) Date of Birth: True copy of S.S.C./H.S.C./MATRICULATION/or its equivalent
- (ii) Intermediate: Xerox copy of Intermediate Certificate or its equivalent
- (iii) Graduation: True Copy of B.A/B.Com/ B.Sc.or its equivalent Degree Certificate
- (iv) Law Degree: True Copy of Law Degree Certificate/ Original Provisional Certificate with Xerox copy.
- (v) \_\_\_\_\_
- (vi) \_\_\_\_\_
- 8. I enclose certificates of good moral character and of fitness to be an Advocate on the Roll of the Bar Council of the State of Andhra Pradesh  
(Name of the Person with designations to be furnished)
- (1) Mr./Ms \_\_\_\_\_
- (2) Mr./Ms \_\_\_\_\_

9. (%)I do hereby declare that I am not in full/part-time employment/service not Engaged in any trade/business or profession either previous or at present.
10. (+)I give particulars of my previous employment or service or trade or business or profession as under (enclose necessary proof.)
11. (+) Have you been dismissed or suspended from service or otherwise punished while in service Yes/No. If Yes, give particulars (enclose necessary proof.)
12. (a) State any other circumstances or incident affecting your character or fitness to be enrolled.
- (b) Whether he/she is healthy and free from any contagious disease. Yes/No. If No, state the details.
13. (+) (a) Have you been convicted previously by any court in India or outside India. If Yes, give particulars with certified copies (=).
- (+) (b) Is there any Criminal proceeding pending/filed against you. Yes/No. If Yes, give full particulars as to the name of court, number, date, nature of proceedings etc.  
(=) (enclose certified copy of such proceedings).
14. (+) Have you been adjudged as insolvent by any court. Yes/No. (=). If Yes, give particulars.

15. I have paid Rs.750/- (Rupees Seven hundred and fifty only) being the enrolment fee payable under section 24(1)(f) of the Advocates Act, 1961 Paid on \_\_\_\_\_(Bank Receipt filed).

**OR**

I have paid Rs.125/- (Rupees One hundred and twenty five only) being the enrolment fee payable under section 24(1)(f) of the Advocates Act, 1961 Paid on \_\_\_\_\_(Bank Receipt filed).

16. I hereby declare that I made previous application for enrolment as Advocate to the Bar Council of \_\_\_\_\_and the application was rejected for the reason of \_\_\_\_\_The Order of the Bar Council concerned to be filed.

17. I hereby declare that if admitted as an Advocate, I will faithfully observe and abide by all rules made by the Bar Council of the State of Andhra Pradesh and the Bar Council of India as amended from time to time for regulating the conduct of Advocates on the State Roll. I have read the rules relating to Standards of Professional conduct and Etiquette.

18. I give my undertaking as required.

19. I undertake to furnish such other particulars as may be required from me for the purpose of this application.

20. I hereby undertake to abide myself with the provisions of rule (7) of chapter III in Part VI of the rules of the Bar Council of India.

21. My photograph was duly attested by Mr./Ms. \_\_\_\_\_  
\_\_\_\_\_on Dt. \_\_\_\_\_

22. I hereby declare that statements made and particulars furnished in this application are true and correct to the best of my knowledge, information and belief. Hence verified on this the \_\_\_\_\_day of \_\_\_\_\_20

Place : AMARAVATI

SIGNATURE

Date :

---

NOTE : If any statement or fact stated in the application is found to be false at any time, the name of the applicant shall be liable to be struck off from the roll under proviso to Sub-Section (i) of Section 28 of the Advocates Act, 1961.

## The Bar Council of The State of Andhra Pradesh, AMARAVATI

### UNDERTAKINGS

I \_\_\_\_\_  
son/daughter of \_\_\_\_\_  
having applied for being admitted and enrolled as Advocate under the Advocates Act, 1961 on the Roll of Bar Council of the State of Andhra Pradesh at AMARAVATI.

- (a) do hereby undertake that if, after my admission as an advocate. I accept full or part-time employment/service, or I am engaged in any trade, business or profession (unless exempted by the Bar Council under its rules) shall forth-with inform the Bar Council of such employment or engagement and shall cease to practice as Advocate and
- (b) do hereby undertake that I shall not accept any employment which, in the opinion of the Bar Council, is derogatory to the status of an Advocate.
- (c) I hereby declare and undertake that-
  - (i) I shall uphold the Constitution of India and the laws:
  - (ii) I shall conform to the standards of professional conduct and etiquette laid by the Bar Council of India.
  - (iii) I shall faithfully discharge every other obligation cast on me by the Advocates Act, 1961 and the rules framed there under: and
  - (iv) I shall inform the Bar Council of A.P. of my suspension of practice, if any. Or any change of address of my residence or place of practice for the proper maintenance of the roll and voters list.

I hereby declare that the facts stated above in this application are true and correct and that the documents filed are true and genuine, Hence verified on this the

\_\_\_\_\_ day of \_\_\_\_\_ 20

At AMARAVATI

Signature

I

CERTIFICATE OF GOOD MORAL CHARACTER

I \_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address & Profession / Occupation or position)

Certify that \_\_\_\_\_  
(Name and description of the applicant)

has been known to me personally for the last \_\_\_\_\_ years last past.

I have had the following opportunities of judging his/her character (that is to say)

\_\_\_\_\_ I believe

him/her to be a person of respectability and a fit and proper person to be admitted as an advocate on the Roll of Advocates of Bar Council of The State of Andhra Pradesh.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20

Date of enrolment /Roll No. of advocate \_\_\_\_\_

Signature

II

CERTIFICATE OF GOOD MORAL CHARACTER

I \_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address & Profession / Occupation or position)

Certify that \_\_\_\_\_  
(Name and description of the applicant)

has been known to me personally for the last \_\_\_\_\_ years last past.

I have had the following opportunities of judging his/her character (that is to say)

\_\_\_\_\_ I believe

him/her to be a person of respectability and a fit and proper person to be admitted as an advocate on the Roll of Advocates of Bar Council of The State of Andhra Pradesh.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20

Date of enrolment /Roll No. of advocate \_\_\_\_\_

Signature

From :

Date \_\_\_\_\_

\_\_\_\_\_  
Advocate, AMARAVATI  
(Name in Block Letters)  
(NOT LESS THAN 5YEARS OF STANDING)

To  
The Secretary,  
Bar Council of the State of Andhra Pradesh,  
AMARAVATI.

Sri, Madem,

I intend to move the enrolment of Sri/Smt. / Kum. \_\_\_\_\_

\_\_\_\_\_ to admit him/her on the Roll of advocates of the Bar Council of the State of Andhra Pradesh, as an advocate under the Advocates Act, 1961 before the Enrolment Committee on Dt. \_\_\_\_\_ 20

Thanking you

Date of Enrolment/State Roll No. of

Introducing Advocate :

Address :

Yours faithfully

Advocate