

UTAH STATE BAR LICENSED PARALEGAL PRACTITIONER Certification of Substantive Law-Related Experience

As proof of employment for each position, an applicant shall provide a **Certification of Substantive Law-Related Experience** signed by the supervising lawyer under penalty of perjury.

Ι	, am a member in good standing of the Bar of	, Bar License
No	I hereby declare the following regarding,	applicant for licensure as a
licensed	l paralegal practitioner:	

- 1. I acted as supervising lawyer for the above-named applicant.
- 2. The work performed under my supervision by the applicant was substantive law-related work as defined in <u>Rule 15-701</u>, meaning "the provision of legal services as a paralegal, paralegal student or law student, including, but not limited to, drafting pleadings, legal documents or correspondence, completing forms, preparing reports or charts, legal research, and interviewing clients or witnesses." It does not include "routine clerical or administrative duties."
- 3. As supervising lawyer, I personally directed, approved, and had responsibility for the work performed by the applicant.
- The applicant performed a total of ______ hours of substantive law-related work under my supervision in the area of Family Law from ______ (Month/Day/Year) until ______ (Month/Day/Year).
- The applicant performed a total of ______ hours of substantive law-related work under my supervision in the area of Landlord-Tenant Law from ______ (Month/Day/Year) until ______ (Month/Day/Year).
- The applicant performed a total of ______ hours of substantive law-related work under my supervision in the area of **Debt Collection** from ______ (Month/Day/Year) until ______ (Month/Day/Year).
- The applicant performed a total of ______ hours of OTHER substantive law-related work not reported in the above paragraphs. This was done under my supervision from ______ (Month/Day/Year) until ______ (Month/Day/Year).

I certify under penalty of perjury under the laws of the State of Utah that the foregoing is true and correct.

Executed this _____ day of _____, 20_____ at ____(City), _____ (State).

Full Name (First, Middle, Last)

Signature

Date

Phone Number

Firm Name/Full Address

City, State, ZIP

Email Address