

Court of Appeals of Georgia
47 Trinity Avenue • Suite 501, Atlanta, Georgia 30334
EXPEDITED REMOTE ADMISSION APPLICATION

Bar Number: _____ Date Admitted to GA State Bar: _____
Requested Admission Date: _____

To the Honorable Court of Appeals of Georgia

The petitioner, having been regularly admitted and licensed to practice law in the superior courts of this State, and being a member in good standing of the State Bar of Georgia, respectfully applies for admission to the bar of this Court.

Last Name: _____ First Name: _____ Middle Name: _____

Signature: _____

Firm or Agency: _____

Mailing Address (Business address preferred):

Telephone Number _____

E-mail Address _____

Sponsor Certification

We hereby certify that we are members of the bar of the Court of Appeals of Georgia, that we know the above applicant personally and that her/his private and professional character is good.

Bar Number: _____ Printed Name: _____

Signature: _____

Bar Number: _____ Printed Name: _____

Signature: _____

FOR CLERK'S OFFICE USE ONLY

Date of Admission: _____

Admission by: Clerk _____ via phone

Expedited Remote Admission must contain original signatures on this form with check
Fee: \$200.00 \$30.00 Admission Application Total: \$230.00