



Emeritus Application

Section I — Applicant Information (Please type or print)

Name (Mr./Ms./Mrs./Hon.) \_\_\_\_\_ Nametag preference (First name/nickname): \_\_\_\_\_

Firm or Court \_\_\_\_\_

Firm or Court Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_\_ ) \_\_\_\_\_

Home address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Preferred address for official ABOTA correspondence:  Office  Home

Date of Birth (mm/dd/yyyy): \_\_\_\_\_ Ethnicity (optional): \_\_\_\_\_ Gender (optional): M / F \_\_\_\_\_

Section II — Emeritus Qualifications

A. Date of ABOTA Membership (must be a member for a minimum of 10 years): \_\_\_\_\_

B. The Member has ceased the active practice of law by reason of one (or more) of the following:

- Age
- Illness
- Injury
- Infirmity
- Other reason satisfactory to the local chapter

C. The Member has served ABOTA and/or the legal profession with distinction.

Yes  No

AND

D. The Member has completely retired from the bench, or the practice of law.

Yes  No

Emeritus status may be granted upon a showing of service with distinction at the complete discretion of the National Board. To determine whether a member of ABOTA has served ABOTA or the legal profession with distinction and thereby qualifies for Emeritus Status, the ABOTA National Board may consider the following criteria **(please attach a letter explaining the items checked below)**:

- Applicant's record of service in elective office in ABOTA.
- Applicant's service in appointed or volunteer capacity in ABOTA (National Board service, National Committee service, Masters programs, Leadership Conferences, National Jury Summits, Journalist Law Schools, local and/or state-regional organizations or chapter activities/programs, etc.
- Applicant's status among peers.
- Milestones in applicants legal career.
- Applicant's general contributions in the legal community.
- Other distinguished achievements or awards.
- Age and health of the applicant.

Section III — Chapter Nomination and Approval

n As a member of the \_\_\_\_\_ Chapter Executive Committee, I hereby certify that the foregoing applicant has been approved for Emeritus Status by the Executive Board of the local chapter

EC Member (please print): \_\_\_\_\_

Title (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_