



Admissions
 SCR 49.10 In-House Counsel
 Application Request Form

PLEASE NOTE: You must provide all of the information requested. Thank you!

Date Requested:

Name (Legal):

Last

First

Middle

Mailing Address:

Home Phone:

E-mail Address:

Work Phone:

Name of Employer:

Please print the request and submit to the State Bar of Nevada, Admissions Department, P.O. Box 50, Las Vegas, NV 89125. You may email your request to michaelh@nvbar.org or fax the request to the Admissions Department at (702) 385-2878. Thank you.

..... for office use only

Tracking #: _____

Date Sent: _____

Processed By: _____