

American Bar Association

Standing Committee on Specialization

NOTICE OF INTENT TO APPLY FOR ACCREDITATION OF SPECIALTY CERTIFICATION PROGRAM

1. Please take notice that the undersigned intends to file an application with the American Bar Association for accreditation of its specialty certification program(s) for lawyers in the following specialty area(s):

List Specialty Field(s) of Practice:

* It is understood that each area or field in which certificates are offered will be evaluated separately.

2. For each specialty area identified above, **please attach a statement** that clearly defines the specialty in terms of the areas of law and practice it covers, and how it is distinct from other specialty areas. The definition should be succinct and should be understandable to both lawyers and non-lawyers who may be unfamiliar with the field.

APPLICANT INFORMATION

Full Name of Organization:	
Address:	
City, State, Zip Code:	
Telephone:	Fax:
Name of Contact Person:	Title:

AUTHORIZED OFFICIAL SIGNATURE (sign in box below)

	Date:
Printed Name:	Title:

Applications for accreditation will not be processed until a completed and signed copy of this Notice of Intent to Apply form is received by the ABA Standing Committee on Specialization along with a non-refundable initial application registration fee in the amount of \$250. The application registration fee should be made payable to the "American Bar Association".

PLEASE SEND COMPLETED FORM AND SPECIALTY DEFINITION STATEMENT

– along with a check in the amount of \$250 –

TO:

**American Bar Association
Standing Committee on Specialization
321 North Clark Street – 19th FL S/E
Chicago, IL 60610-4714**

ATTN: Accreditation System Coordinator