

**NOTICE:**

**APPLICATIONS FOR  
ORIGINAL CERTIFICATION  
MUST BE SUBMITTED TO THE  
COMMISSION ON CLE &  
SPECIALIZATION  
NO LATER THAN MAY 31<sup>ST</sup>**



# The Supreme Court of South Carolina

COMMISSION ON CONTINUING LEGAL EDUCATION AND SPECIALIZATION

ESTATE PLANNING AND PROBATE LAW  
SPECIALIZATION ADVISORY BOARD

APPLICATION FOR CERTIFICATION  
IN  
ESTATE PLANNING AND PROBATE LAW

I hereby apply for certification as an ESTATE PLANNING AND PROBATE LAW specialist pursuant to Supreme Court of South Carolina Rule 408, Commission Regulations and Estate Planning and Probate Law Specialization Advisory Board Standards and Procedures.

I. GENERAL INFORMATION.

Name: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Office Address: \_\_\_\_\_

\_\_\_\_\_

Telephone:

Office: \_\_\_\_\_ Home: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Name to appear on your certificate: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Do you wish notice of your certification to be provided to your home-town newspaper?

Yes \_\_\_\_\_ No \_\_\_\_\_ If **YES**, please provide the name of that paper and the city in which it is published: \_\_\_\_\_

II. EDUCATION/BAR MEMBERSHIP/CERTIFICATION

A. Colleges and Law Schools Attended: From/To Degree

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B. Date admitted to South Carolina Bar \_\_\_\_\_

C. Are you licensed to practice in other states?  
Yes \_\_\_\_\_ No \_\_\_\_\_. If **YES**, indicate state(s) and when admitted:

State: \_\_\_\_\_ Admitted: \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

D. Are you an active member in good standing of the South Carolina Bar and all other Bars of which you are a member?

Yes \_\_\_\_\_ No \_\_\_\_\_. If **NO**, explain below. (Attach additional sheets if necessary.)

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E. Are you certified or designated a specialist in any specialty field other than Estate Planning and Probate Law?

Yes \_\_\_\_\_ No \_\_\_\_\_. If **YES**, indicate the specialty field, when and where certified, the organization issuing your certification/designation, and the percentage of your involvement in that specialty. (Attach additional sheets if necessary.)

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F. Are you designated or certified as a specialist in Estate Planning and Probate Law by any certifying authority other than the Supreme Court of South Carolina?

Yes \_\_\_\_ No \_\_\_\_\_. If **YES**, indicate when, where, and by what organization you were certified:

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G. Have you ever applied for and been denied certification or recertification by any organization?

Yes \_\_\_\_\_ No \_\_\_\_\_. If **YES** indicate the organization that denied you certification or recertification and the circumstances surrounding the denial. (Attach additional sheets if necessary.)

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III. PRACTICE OF ESTATE PLANNING AND PROBATE LAW

A. I have been engaged in the actual practice of law on a full-time basis (as defined in §II A, Standards and Procedures for Certification, Recertification, and Decertification in Estate Planning and Probate Law) for a period of at least five (5) years.

Yes \_\_\_\_ No \_\_\_\_\_

B. Name and address of present firm, partnership, professional corporation, etc.

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C. How long have you been a member of, employed by or associated with the firm, etc., indicated in § III B above?

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D. During the past five (5) years, have you been a member of, employed by, or associated with any firms, etc., other than the one indicated in § III B above?

Yes \_\_\_\_ No \_\_\_\_\_. If **YES**, indicate name(s), address(es) and date(s) of such membership, employment, or association. (Attach additional sheets if necessary.)

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E. Did any of the years of practice indicated above include practice on a "part-time" basis?

Yes \_\_\_\_ No \_\_\_\_\_. If **YES**, indicate the years' practice that were part-time and the percentage of time devoted to practice during such years and describe briefly the balance of your activity during those periods of part-time practice. (Attach separate sheets if necessary.)

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F. Are you engaged in any business other than the practice of law?

Yes \_\_\_\_\_ No \_\_\_\_\_.

Are you licensed to engage in another business such as insurance, real estate, CPA, etc., regardless of whether you actively engage in the business covered by such license?

Yes \_\_\_\_\_ No \_\_\_\_\_. If you answer **YES** to either of these questions, indicate the nature of any such businesses and licenses currently held by you that authorize you to engage in any business other than the practice of law. Also describe any such licenses held by any of your employees if such licenses relate to their employment by you. (Attach additional sheets if necessary.)

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IV. SUBSTANTIAL INVOLVEMENT IN ESTATE PLANNING AND PROBATE LAW  
(See § II B, Standards & Procedures)

A. I have devoted the following percentages of my time to handling matters in which issues of estate planning and probate law were significant within each of the five (5) calendar years immediately preceding the date of this application.

<u>YEAR</u>	<u>PERCENTAGE</u>
1.____	____ % estate planning ____ % probate law
2.____	____ % estate planning ____ % probate law
3.____	____ % estate planning ____ % probate law
4.____	____ % estate planning ____ % probate law
5.____	____ % estate planning ____ % probate law

B. Describe how you determined the percentage of your time devoted to estate planning and probate law during the five (5) years indicated in § IV C above. (Attach additional sheets if necessary.)

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C. Please describe in narrative fashion the nature of that portion of your practice over the past five (5) years, listed in §IV A above, as being substantially involved in the practice of estate planning and probate law. Indicate the type of clients you represent and if you engage in a group practice, include a description of the size of the firm in which you practice and the principal areas of practice by other lawyers in the firm. (Attach additional sheets if necessary.)

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D. I have been involved in the following number of matters in which estate planning and probate law issues were significant factors and in which I personally handled estate planning and probate law issues during the period covered by §IV A:

Type of Matter	No. of Cases	Nature of Involvement
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1. ESTATE PLANNING (counseling)

2. ESTATE PLANNING (preparation of instruments - specify type)

3. ESTATE ADMINISTRATION - (Probate) Specify nature, i.e., probate of decedent's estates, trusts, guardianships, will contests, etc.

Type of Matter

No. of Cases

Nature of  
Involvement

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4. ESTATE ADMINISTRATION -  
Preparing, reviewing, etc., Federal  
Estate Tax Returns; state inheri-  
tance/estate tax returns, etc.;  
representation before Internal  
Revenue Service or state taxing  
authorities in connection with tax  
returns.

E. Was any of the involvement in estate planning and probate law reported in this section during employment in government service?  
Yes\_\_\_\_\_ No \_\_\_\_\_. If **YES**, give full information about your involvement in estate planning and probate law while so employed. (Attach additional sheets if needed.)

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F. Was any of the involvement in estate planning and probate law reported in this section teaching law courses?  
Yes\_\_\_\_\_No\_\_\_\_\_.  
If **YES**, give a description of the course(s), the institution, and the credited hours:

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G. If any explanation would be helpful in analyzing the number of estate planning and probate law matters reported in this section, give that explanation here. (Attach additional sheets if needed.)

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V. RECORD OF DISCIPLINE

A. Have you ever been disciplined or suspended by the Bar of any state or other body authorized to impose professional discipline or suspension?

Yes \_\_\_\_\_ No \_\_\_\_\_.

If **YES**, list all instances of discipline to include (1) title of the disciplinary action, (2) action number, (3) nature of the charge, (4) nature of sanction, (5) date sanction was imposed, and (6) date sanction was terminated. A failure to report a record of discipline and/or suspension may constitute grounds for denial of an application or for revocation of a certificate. (Attach separate sheets if necessary.)

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B. Have any malpractice claims been paid by you or anyone on your behalf or are there any such claims or complaints now pending against you?

Yes \_\_\_\_\_ No \_\_\_\_\_. If **YES**, disclose all pertinent matters relating to such claims or complaints. (Attach additional sheets if necessary.)

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C. Have you ever been convicted, given probation, or fined for a crime (excluding minor traffic offenses), whether resulting from a guilty plea, nolo contendere or from a verdict after trial, or otherwise, regardless of the dependency of an appeal?

Yes \_\_\_\_\_ No \_\_\_\_\_. If **YES**, give full details. (Attach additional sheets if necessary.)

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D. Have you filed all state and federal income tax returns for all past years, including the most recently ended calendar year (or fiscal year, if appropriate) and are you currently in good standing with the State Department of Revenue and the IRS?

Yes \_\_\_\_\_ No \_\_\_\_\_. If **NO**, explain fully. (Attach additional sheets if necessary.)

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VI. CONTINUING LEGAL EDUCATION

List the courses you have attended and other CLE involvement during the past five (5) years (name of course; sponsor; subject matter; hours attended; and date and location of the course). (Attach additional sheets if necessary.)

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VII. PEER REVIEW (see § II K, Standards & Procedures)

I submit the names, addresses and telephone numbers of five (5) lawyers, who can attest to my competence in estate planning and probate law. (Please note that references from certified estate planning & probate law specialists are preferred. Also note, references may not include a partner, associate, employer, member of the Estate Planning and Probate Law Specialization Advisory Board or Commission on Continuing Legal Education and Specialization.)

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VIII. UNDERSTANDINGS AND DECLARATIONS

A. I have read the Standards and Procedures for Certification, Recertification and Decertification promulgated by the Estate Planning and Probate Law Specialization Advisory Board, Supreme Court of South Carolina Rule 408 and Commission Regulations on Mandatory Continuing Legal Education and I certify that I believe I am fully qualified for and know of no reason why I should not be entitled to certification.

Yes \_\_\_\_\_ No \_\_\_\_\_

B. I agree to abide by the Standards and Procedures for Certification, Recertification and Decertification promulgated by the Estate Planning and Probate Law Specialization Advisory Board, Supreme Court of South Carolina Rule 408 and Commission on Continuing Legal Education and Specialization Regulations on Mandatory Continuing Legal Education, as amended from time to time.

Yes \_\_\_\_\_ No \_\_\_\_\_

C. I agree to pay all fees required by the Estate Planning and Probate Law Specialization Advisory Board and the Commission on Continuing Legal Education and Specialization when due.

Yes \_\_\_\_\_ No \_\_\_\_\_

I understand that an application fee (**currently \$150.00**) must accompany this application, that a certification fee (**currently \$150.00**) must be paid upon notice of my certification, and that I must pay an annual filing fee (**currently \$100.00**) when I file my report of compliance with the CLE requirements of the Estate Planning and Probate Law Specialty.

Yes \_\_\_\_\_ No \_\_\_\_\_

- D. I agree that I shall surrender any certificate held by me upon revocation or resignation of my certification or upon my failure for any reason to recertify.  
Yes\_\_\_\_\_No\_\_\_\_\_
- E. I agree to submit to an oral interview/examination before the Estate Planning and Probate Law Specialization Advisory Board, any of its individual members, or any authorized representatives of the Board for the purpose of testing whether my knowledge, proficiency, competency, and experience in estate planning and probate law warrants my certification.  
Yes\_\_\_\_\_No\_\_\_\_\_
- F. I agree to submit to a written examination to test my competence and qualifications for certification. I understand that I must make a passing score, as determined by the Estate Planning and Probate Law Specialization Advisory Board, and that I must complete the examination within two (2) years of the date of this application and that the examination will be given at a time and place specified by the Board.  
Yes\_\_\_\_\_No\_\_\_\_\_
- G. I agree to notify the Estate Planning and Probate Law Specialization Advisory Board if I cease to practice law or to be substantially involved in the practice of estate planning and probate law.  
Yes\_\_\_\_\_No\_\_\_\_\_
- H. I agree to supply all documents, records, or other information that may be requested from me in the investigation of this application.  
Yes\_\_\_\_\_No\_\_\_\_\_
- I. I certify that I am covered by malpractice insurance.  
Yes\_\_\_\_\_No\_\_\_\_\_.  
If **YES**, indicate your coverage\_\_\_\_\_ and deductible\_\_\_\_\_.
- J. In making and filing this application for certification, I authorize all persons, firms, officers, corporations, associations, organizations, state or federal agencies, and institutions to furnish to the Commission, Estate Planning and Probate Law Specialization Advisory Board, or any of their authorized representatives, all documents, records or other information that may be requested in the investigation of this application, specifically including the records of grievances in possession of any grievance committee or commission. As provided in Rule 12(c)(3) of Rule 413, SCACR, I hereby expressly authorize and permit the disclosure of disciplinary information by The Supreme Court of South Carolina, the Commission on Lawyer Conduct, the Commission on Judicial Conduct, the Office of Disciplinary Counsel, the Office of the Attorney General of South Carolina, and similar federal entities. I further agree and understand that all information received by the Commission or Estate Planning and Probate Law Specialization Advisory Board may be treated confidentially by the Commission or Board and I specifically waive any right to review any and all Statements of References made to the Commission or Board which become a part of my official file.

\_\_\_\_\_  
Signature

State of South Carolina  
County of \_\_\_\_\_

I, \_\_\_\_\_, being duly sworn, state that I have read the foregoing application for certification and its attached exhibits, if any, and have made each statement and representation therein and answered each question therein fully and frankly and without concealment or reservation, and such questions and answers are, within my personal knowledge, true and complete.

\_\_\_\_\_  
Signature of Applicant

SUBSCRIBED and SWORN to before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_(SEAL)

Notary Public for: \_\_\_\_\_

My Commission expires: \_\_\_\_\_