



PRO HAC VICE

Rules of the Supreme Court of the State of Hawaii 1.9

Appearance of Counsel in State Court & Administrative Proceedings

*N/A to Federal Court & Administrative Proceedings

2017 Registration

Submit within ten (10) days after entry of the Order approving appearance.

Compete and sign the 2017 Pro Hac Vice registration form, attach a copy of the Order, and payment and submit to the HSBA for processing.

2017 Fee Schedule

Credit card (VISA or MasterCard) OR check payment accepted.

Make check payable to the Hawaii State Bar Association.

Disciplinary Board assessment	\$600.00
Registration and Administrative Services fee	\$150.00
Processing fee	<u>\$ 15.00</u>
TOTAL	\$765.00

Upon completion of registration and payment processing an electronic confirmation message will be transmitted.

For additional information contact Liberty Castillo

Lcastillo@hsba.org (808) 792-7339.



2017 PRO HAC VICE REGISTRATION

Name: _____
 First- no initials **Full Middle – no initials** **Last**

Social Security Number : _____ - _____ - _____ Date of Birth: _____

The Office of Disciplinary Counsel requires the HSBA to collect SSN information for its administrative and investigative purposes, if needed. In addition for ONLINE license registration form access, the LAST four digits of your SSN will be combined with 3 letters for your INITIAL password. You may change your password once log in has been successfully completed.

Pro Hac Vice Member Information

Business Address (Publication Address)

Employer Information

Phone: _____

Fax : _____

Email Address: _____@_____

Communication Address Preferred Mailing and E-Mail (REQUIRED HSBA use only)

Phone: _____

Fax : _____

Email Address: _____@_____

Service of Process Street Address (REQUIRED by Disc. Counsel)

Confidential

Phone: _____

Fax : _____

Residential Street Address (REQUIRED by Disciplinary Counsel)

Phone: _____

Fax : _____

Email Address: _____@_____

Name of the HSBA Attorney associated with: _____

License number of the HSBA Attorney you are associated with : _____

Name of Case(s) which you are being admitted to as Pro Hac Vice:

- _____
- _____
- _____

Approval date for case(s) you have been admitted to as Pro Hac Vice :

Case Number

Approval Date

PRIVATE STATISTICAL INFORMATION

Response Required

1. **HSBA MEMBERSHIP STATUS (check one)**
 Private Practice In House Counsel Government Judge Foreign Law Consultant
 Inactive-Voluntary Inactive-Pro Bono (**RSCH 20**) Affiliate Pro Hac Vice

2. **STRUCTURE OF PRIVATE PRACTICE :** Solo Practitioner Firm of 2-5 attorneys Firm of 6-14 attorneys
 Firm of 15 or more attorneys Not Applicable (NOT in private practice)

3. **PROFESSIONAL LIABILITY INSURANCE RSCH Rule 17(d)(1)(C)**
Do you have Professional Liability Insurance coverage? Yes No Not Applicable (NOT in private practice)

4. **DISCIPLINARY ACTION:**
During 2016 have you been subject to, or received, any professional discipline as the result of a disciplinary investigation or formal proceeding in any jurisdiction other than Hawaii?
 Yes. Please mail a copy of the disciplinary action or order to the Office of Disciplinary Counsel, 201 Merchant Street, Suite 1600, Honolulu, HI 96813.
 No

5. **CRIMINAL OFFENSES:**
During 2016 have you been convicted of any criminal offenses in any jurisdiction, excluding offenses classified as petty misdemeanors, violations or infractions under Hawai'i law?
 Yes. Please mail a copy of the judgement or order to the Office of Disciplinary Counsel, 201 Merchant Street, Suite 1600, Honolulu, HI 96813.
 No

6. **LICENSE(S) IN OTHER JURISDICTIONS :** (Please attach additional sheet if necessary)
License Number : _____ Jurisdiction/State: _____ Date of Admission: _____ Status : _____
License Number : _____ Jurisdiction/State: _____ Date of Admission: _____ Status : _____
License Number : _____ Jurisdiction/State: _____ Date of Admission: _____ Status : _____
License Number : _____ Jurisdiction/State: _____ Date of Admission: _____ Status : _____

PAYMENT METHOD

Disciplinary Board assessment	\$600.00
Registration and Administrative Services fee	\$150.00
Processing fee	<u>\$ 15.00</u>
TOTAL	\$765.00

Payment by

MC VISA CHECK # _____

Cardholder Name (Print) _____ Cardholder Signature: _____

Account #: _____ Exp. Date : _____

Billing Address: _____

SIGNATURE

I have read the above and certify that the information above is current and correct.

SIGNATURE: _____ DATE: _____ PHONE: _____

PRINT NAME: _____

RULES OF THE SUPREME COURT OF THE STATE OF HAWAII

Supreme Court Rule 1.9

http://www.courts.state.hi.us/docs/court_rules/rules/rsch.htm#Rule_1.9

1.9. *Pro hac vice* appearance of counsel.

Any attorney actively licensed to practice law by the highest court of a state or territory of the United States or the District of Columbia who is not a resident of Hawai'i may be permitted to associate himself or herself with a member or members of the Hawai'i bar (local counsel) in the presentation of a specific case at the discretion of the presiding judge or judges. The petition or motion for *pro hac vice* appearance and any subsequent documents submitted on behalf of a party must be filed by local counsel.

An attorney allowed to appear *pro hac vice* shall, for each year the order is effective, pay to the Hawai'i State Bar an annual Disciplinary Board fee authorized by the supreme court, provided that if the attorney is allowed to appear in more than one case, only one fee shall be paid. The Hawai'i State Bar may assess a reasonable fee to register and collect this fee on an annual basis.

Failure to file proof of such payment in the record, within 10 days after entry of the order and in January of each subsequent year in which the case is pending, voids the order allowing the appearance *pro hac vice*.

(Amended September 5, 1996, effective October 1, 1996; further amended October 21, 1996, effective October 1, 1996; further amended and effective October 27, 1997; further amended July 25, 2007, effective January 1, 2008; further amended August 30, 2010, effective September 27, 2010.)