

Georgia Bar Number: _____ (State Bar Office Use)

ATTENTION: (ONLY Active Instate resident who took the 2-day exam must complete this form)

COMPLETE AND RETURN WITH YOUR ENROLLMENT FORM TO:
STATE BAR OF GEORGIA - MEMBERSHIP DEPARTMENT
104 Marietta Street, NW - Suite 100
Atlanta, Georgia 30303

TRANSITION INTO LAW PRACTICE PROGRAM (TILPP) ENROLLMENT FORM

Please check only one box below

JUDICIAL LAW CLERK:

Rule 8-104(b)(1)(b) provides that TILPP compliance is deferred until the completion of your Clerkship. Written confirmation of TILPP deferral and further information will be furnished upon receipt of this form.

EMPLOYED IN LAW FIRM OR LEGAL ORGANIZATION:

Your Mentor should be nominated through consultation with your employer.

Print or type your Mentor's name and Georgia Bar Number:

Mentor's Name and Bar Number

If your employer has not identified your Mentor yet, please check this box

SOLE PRACTITIONER:

You have the opportunity to nominate your Mentor. **Print or type your Mentor's name and Georgia Bar Number:**

Mentor's Name and Bar Number

If you need help locating a Mentor, (1) please check this box ; and (2) list the practice areas you intend to pursue:

OTHER:

If you are unemployed, or not employed with a law firm or legal organization, you have to comply with TILPP unless you elect Inactive Status. Your compliance will occur in a Group Mentoring environment. Details will be furnished upon receipt of this form.

(THIS FORM DOES NOT REQUIRE A NOTARY).

I hereby certify that the above information is correct and complete.

PRINT YOUR NAME (REQUIRED)

YOUR SIGNATURE (REQUIRED)

NOTE: Your original signature is required. This information cannot be submitted electronically or via facsimile Transmission.