



# State Bar of Georgia Transition Into Law Practice Program (TILPP) EXEMPTION/DEFERMENT AFFIDAVIT



Please complete and return the **original notarized** form to:  
State Bar of Georgia—Membership Department  
104 Marietta Street NW, Suite 100, Atlanta, GA 30303

PLEASE USE **BLUE INK**.

For proper notarization, this section **MUST** be completed.

STATE of \_\_\_\_\_  
COUNTY of \_\_\_\_\_ ADDRESS \_\_\_\_\_

Attorney Name: \_\_\_\_\_ Street: \_\_\_\_\_

Bar # (if assigned): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

personally appeared before the undersigned Notary Public, who after being duly sworn, deposes, states and claims as follows:

### EXEMPTIONS/DEFERMENTS:

*Pursuant to Rule 8-104(B)(1)(a); Rule 8-104(C)(1)or(4)*

CHOOSE THE BEST APPLICABLE OPTION BELOW. PLEASE CHECK ONLY ONE.

- Admitted On Motion (Exemption):**  
I was admitted to the U.S. jurisdiction(s) of \_\_\_\_\_ on the following date(s): \_\_\_\_\_.
- Admitted 2 Years or More in Another U.S. Jurisdiction (Exemption):**  
I was admitted to practice in the state of Georgia on (date) \_\_\_\_\_ in \_\_\_\_\_ County Superior Court. I was admitted to the U.S. jurisdiction(s) of \_\_\_\_\_ on the following date(s): \_\_\_\_\_. I have been actively engaged in the practice of law for **two or more years** in another U.S. jurisdiction **immediately prior** to my admission to practice law in Georgia.
- Foreign Law Consultant (Exemption):**  
I was admitted to the state(s) of \_\_\_\_\_ on the following date(s): \_\_\_\_\_. I have been actively engaged in the practice of law for **two or more years immediately prior** to my admission on motion to practice law in the state of Georgia.
- Inactive Status (Deferment):**  
I am electing Inactive Status. I am deferred from TILPP and all CLE requirements for so long as I maintain Inactive Status. (*Inactive Status* indicates a member who is in good standing, paid inactive dues, and by inactive election is currently **not** eligible to practice law in Georgia.)
- Non-Resident (Deferment):**  
I am **NOT** a Georgia resident, **nor do I represent Georgia clients**. I will comply with the CLE requirements of my resident U.S. jurisdiction. **Should I relocate to Georgia or begin representing Georgia clients, I must notify TILPP immediately and enroll.**
- Judicial Clerkship (Deferment):**  
Rule 8-104(B)(1)(b) provides that TILPP compliance can be deferred until the completion of your clerkship. Written confirmation of TILPP deferral and further information will be furnished upon receipt of this form.  
Court(s): \_\_\_\_\_ Judge(s): \_\_\_\_\_ Estimated End Date(s) of Clerkship: \_\_\_\_\_  
**You are required to submit a Judicial Clerkship Completion Form immediately upon the end of your clerkship to enroll in TILPP.**

I am over eighteen years of age, under no legal disabilities, am competent to give this affidavit, and have personal knowledge of the facts contained herein.

*Please print and sign your name  
in the presence of a Notary Public.*

Signed, sealed and subscribed before the undersigned this, the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Print Your Name (Required)

\_\_\_\_\_  
Signature (Required)

(NOTARY SEAL)