

**Re-Registration Application  
for Practice Pending Admission  
pursuant to Tenn. Sup. Ct. Rule 7, § 10.07**

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

Applicant Email: \_\_\_\_\_

By affixing my signature to this document, I certify the following (check all that apply):

- I first applied for Practice Pending Admission (“PPA”) on (month/year):  
\_\_\_\_\_
  
- I have associated with a different attorney who is admitted and in good standing in Tennessee.

**New Associated Attorney**

Name: \_\_\_\_\_ **BPR #** \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Submitted with this registration application is an affidavit from the associated attorney listed above who is licensed and in good standing in Tennessee stating that the attorney agrees to associate with the applicant in accordance with the provisions of Sections 10.07.

By signing below, I swear or affirm that the answers and statements on this application are complete, true and correct. I have not altered the wording on any question. Under penalties of perjury, I declare that I have read the foregoing application and that the statements contained herein are true and complete.

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

Date: \_\_\_\_\_