



ATTORNEY REGISTRATION AND DISCIPLINARY COMMISSION  
of the  
SUPREME COURT OF ILLINOIS  
E-mail: [registration@iadc.org](mailto:registration@iadc.org)  
Fax: (312) 565-0997

**LETTER OF GOOD STANDING REQUEST FORM**

I hereby request a letter of good standing (reflecting my status as an Illinois lawyer) and provide the information listed below in support of my request. I understand that the verification will include my full name as licensed, the date of my licensure, and my current registration status.

I acknowledge that the verification will disclose any and all public ARDC proceedings and public disciplinary sanctions related to me. The written verification will also disclose pending confidential matters related to me if my request is for a verification for use by one or any of the following: admission authorities in another jurisdiction in connection with my application for admission to the bar; a screening committee in connection with my application for a judgeship; or a governmental employer in connection with my application for government employment.

The confidential information will be provided pursuant to authorization from the Supreme Court under Rule 766(b)(2). I acknowledge that I have no right to confidentiality in the information being provided and I expressly waive any claim to such a right.

My Full Name: \_\_\_\_\_

ARDC Number: \_\_\_\_\_

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

**Reason for Request**

\_\_\_\_ Application for admission to the bar (not isolated case admission)

Specify jurisdiction or court: \_\_\_\_\_

\_\_\_\_ Application for a judicial position

Specify judicial position: \_\_\_\_\_

\_\_\_\_ Application for government employment

Specify employer: \_\_\_\_\_

\_\_\_\_ Other

Please specify: \_\_\_\_\_

Name and address to which written verification should be sent:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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