

Sr. No. _____

Dated _____

**Declaration Form to be submitted by
the Advocates enrolled after 1st January, 2019**

Passport size
Photograph of
Advocate

1. Name _____

2. Father's Name _____

3. Present Address _____

4. Enrolment Number _____ Dated _____

5. Place of Practice _____

6. When did you pass your AIBE ? _____

AIBE Roll No. _____ (Attach the copy of COP)

7. Name of Bar Association/Place where you want to cast your vote in the election of
Bar Association _____8. Place where you intend to cast your vote in the elections of State Bar Council
_____9. Whether, after getting enrolled you are in practice or have joined some job, business,
etc. (give details) _____

continued.....

10. If you have not passed the AIBE within two years of your enrolment, whether you have left practice and informed your Bar Association and State Bar Council?
(give details) _____

11. Details of qualification

Sl. No.	Name of the Board/University	Roll No.	Year of Passing
A.	Secondary Exam		
B.	Senior Secondary/ Intermediate (+2)		
C.	Graduation		
D.	LL.B.		

I do hereby declare that all the informations given above are true and correct. If any of the informations are found to be false, then I will be liable to be prosecuted under the Criminal Law.

Dated:
Candidate

Signature of

Recommended By

Full Signature with name
of Authorised Member
Bar Council of Punjab and Haryana
Dated ;

&

Full Signature with name
of President/ Secretary
Bar Association (seal)
Dated ;