

TRUST & ESTATE SPECIALTY BOARD (“TESB” OR “BOARD”)

**APPLICATION FOR INITIAL CERTIFICATION IN
INDIANA TRUST & ESTATE LAW**

Mail Completed Application to:

TESB
Indiana State Bar Association
One Indiana Square, Suite 530
Indianapolis, Indiana 46204
(317) 639-5465;
(800) 266-2581

Application Deadline: June 30, 2020

OR

Submit online with payment: www.inbar.org/TESBApp

Please submit the following with your application:

- 1.) \$350.00 application filing fee. Please make checks payable to Trust & Estate Specialty Board. (Payment may be made with credit card if submitting online via the link above.)
- 2.) A current transcript of your continuing legal education courses. Please indicate the specific courses that you believe qualify for credit as required in Section VIII below. You may do so by highlighting or entering a check mark next to the classes you believe qualify.
- 3.) Malpractice Insurance – current certificate of adequate malpractice insurance (up to \$500,000.00 per loss.)

Accreditation by the Indiana Office of Admissions and Continuing Education (“ACE”) of the Board as an independent certifying organization indicates solely that the certification program of the Board has met the ACE's standards.

No applicant shall be denied certification based upon race, religion, gender, sexual orientation, disability or age.

All references below to the “Standards” mean the Standards for Certification in Indiana Trust & Estate Law contained in the Trust & Estate Specialty Board Plan for Trust & Estate Practice Specialty Certification. A copy of the Plan is attached for your careful review before completing this application.

I. DEFINED TERMS

The following terms have the following meanings for purposes of this application:

- A. “Indiana Clients” include (i) clients who are or who plan to become residents of Indiana; (ii) clients who once were residents of Indiana and still have business interests or property in Indiana; (iii) clients who do business and have a business location in Indiana; (iv) clients who are personal representatives of Indiana estates, in their capacities as such personal representatives; (v) clients who are guardians of Indiana residents, in their capacities as such guardians; and (vi) clients who are trustees of Indiana trusts, in their capacities as such trustees.
- B. “Non-Indiana Clients” are clients who are not Indiana Clients.
- C. “Indiana Matters” refer to matters pending before Indiana courts or administrative agencies or primarily involving the interpretation or application of Indiana statutory or common law.
- D. “Indiana Trust & Estate Matters” include (i) Indiana decedents’ estates; (ii) Indiana guardianships; (iii) Indiana trusts; and (iv) reporting or payment of, or controversies regarding, Indiana death taxes or fiduciary income taxes.
- E. “Trust & Estate Law” refers to the practice of law dealing with the analysis, planning, and recommendations for the conservation and disposition of clients’ assets in accordance with the clients’ expressed desires, including tax effects and other consequences; the drafting and preparation of legal instruments to effectuate the clients’ estate plans, *e.g.*, wills, trusts and other legal documents; and the administration of estates, guardianships, and trusts.
- F. “Indiana Trust & Estate Law” refers to the practice of Trust & Estate Law for Indiana Clients, or for Non-Indiana Clients in respect of Indiana Trust & Estate Matters.

II. GENERAL INFORMATION

Name: _____
(Please type name as you wish it to appear on your certificate of specialization, if granted)

Date of Birth: _____

Year Admitted to Indiana Bar: _____

Indiana Attorney Number: _____

If licensed in another state, name of state, date admitted and attorney number in the other state:

Firm Name: _____

Office Address: _____
City State Zip

Office Phone: () _____ Office Fax: () _____

Email Address: _____ (Some information will be disseminated via email)

III. EDUCATION

College(s) and Law School attended:

<u>Name</u>	<u>From</u>	<u>To</u>	<u>Degree</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IV. EMPLOYMENT HISTORY On a separate sheet please provide a complete statement of your employment since admission to the practice of law. Include the dates of employment, employer's name and address, and a brief summary of the nature of work you performed.

V. INDIANA PRACTICE (See Articles 3.2 and 3.3 of Standards) (Judges are encouraged to review Article 3.2 of the Standards for special provisions that may be applicable.)

Each question must be answered. Failure to answer all of the following questions with “Yes” will result in denial of your application for certification, except as otherwise stated in this application or in the Plan.

Yes No
 Are you a member in good standing of the State Bar of Indiana? (See Article 3.2.2.1 of the Standards)

Yes No
 Have you for the three (3) years immediately preceding the date of this application provided legal advice and services to Indiana Clients, or to Non-Indiana Clients in respect of Indiana Matters, an average of at least three (3) days per week?

Yes No
 Have you been personally engaged in the practice of law for at least seven (7) years on a full time basis? (If you believe that any part time practice meets the requirements of Article 3.2.2.2.8 of the Standards, please attach the supporting information set forth there to this application.)

Yes No
 Have you devoted a minimum of one third (1/3) of your billable or pro bono services and an average of at least 500 hours per year in the practice of Trust & Estate Law in each of the most recent five (5) full calendar years preceding the year of this application, and have you engaged in a minimum of 5,000 lifetime hours in that practice?

Applicants who are judges are encouraged to provide a narrative describing how long you have been a judge, and the proportion of your judicial work that is devoted to Trust & Estate Law, on a separate page.

VI. CHARACTER AND REPUTATION (See Article 3.2.3 of Standards)

This Section VI requires disclosure of any matter, regardless of whether an appeal is pending. Each question must be answered. If you answer “YES” for any of these questions, please provide full details on a separate sheet of paper.

Yes No
 Have you received notice, or are you aware, of any now pending investigation, complaint, inquiry or other disciplinary proceeding by any local, state, or district grievance committee of an organized bar, the Indiana Supreme Court Disciplinary Commission, a similar designated entity in another state that has authority over

attorney discipline, or any other judicial or administrative body? (See Article 3.2.3.1.1 of Standards)

Yes No

Have you ever been subject to any disciplinary sanction by any local, state, or district grievance committee of an organized bar, the Indiana Supreme Court Disciplinary Commission, by an entity in another state that has authority over attorney discipline, or any other judicial or administrative body? Disciplinary sanctions include without limitation: disbarment, resignation, suspension, and reprimand (public or private) (See Article 3.2.3.1.1 of Standards)

Yes No

Have you ever been convicted, given probation and/or fined for a serious crime as defined in the Standards?

VII. REFERENCES (See Article 3.2.4 of Standards) Do not duplicate names

Please provide a representative list of at least five (5) lawyers or judges who are knowledgeable regarding the Trust & Estate Law area with whom you have had professional dealings during the three (3) calendar years preceding the year of this application and whom the Board will contact directly to inquire about your special competence in Indiana Trust & Estate Law: At least four (4) of your required references must be residents of Indiana, and at least three (3) of these four (4) must themselves be substantially involved in the Indiana Trust & Estate Law practice area. You should provide more than the required number of references in case some of them fail to respond timely and adequately to the Board's information request. None of your references may be engaged in the practice of law with you or be related to you. Current members of the Trust & Estate Specialty Board may not serve as references.

	<u>Name</u>	<u>Address and Email Address</u>	<u>Length of time acquainted</u>
1.	_____	_____ _____ Email: _____	_____
2.	_____	_____ _____ Email: _____	_____
3.	_____	_____ _____ Email: _____	_____

4. _____

 Email: _____
5. _____

 Email: _____
6. _____

 Email: _____
7. _____

 Email: _____

References provided shall be confidential, and copies of the references' responses shall not be provided to an applicant. In the event of an appeal by the applicant of the Board's determination to deny certification, a compilation of reference scores, without individual identifying information, will be provided to the applicant.

VIII. CONTINUING LEGAL EDUCATION (Article 3.2.5 of Standards)

For initial certification you are required to have completed forty-five (45) hours of continuing legal education in subjects directly related to Trust & Estate Law during the period beginning January 1, 2018 and ending December 31, 2020. Your CLE should indicate that you are proficient and current in all of the areas needed to enable you be recognized as a Trust & Estate Law specialist. In order for CLE programs to count toward the forty-five (45) hour requirement, they generally must have been approved by the ACE. In addition, they must satisfy the requirements of the Board's CLE guidelines. These control which programs or portions of programs will be recognized as Trust & Estate Law programs and the number and variety of Trust & Estate Law areas such programs must cover. A copy of the Board's CLE guidelines is attached for your careful review before completing this application.

You should obtain and attach a current transcript of your CLE courses from the ACE. If you are including CLE hours to be earned after the date of this application and before December 31, 2020, please notify us in writing after submitting the course information to the ACE. If otherwise granted, your certification will be withheld by the Board until evidence of your completion of such hours is received.

IX. SUBSTANTIAL INVOLVEMENT AND SPECIAL COMPETENCE (See Article 3.3.1 of Standards)

The information in this Section IX relates to the **most recent five (5) calendar years** preceding the year of this application.

- A. Please provide a narrative summarizing your Trust & Estate Law practice and how it meets the requirements of the Standards.

Applicants who are judges are encouraged to provide a narrative describing your judicial experience(s) that relates to Trust & Estate Law on a separate page.

- B. I am familiar with the design and preparation of, and in the last 5 years regularly have advised colleagues and clients regarding, each of the types of estate planning instruments checked “yes” below:

<u>Type of Instrument</u>	<u>Check</u>	
Simple Wills	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Complex Wills (e.g., credit shelter or marital trusts, generation skipping or charitable planning, special needs trusts, etc.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Complex Revocable Trusts (e.g., credit shelter or marital trusts, generation skipping or charitable planning, special needs trusts, etc.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Irrevocable Trusts (e.g., for life insurance or other family gifting purposes)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Charitable Lead or Remainder Trusts	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Grantor Retained Annuity Trusts	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Qualified Personal Residence Trusts	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Family Limited Partnerships/other comparable entities	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Buy-Sell or Cross Purchase Agreements	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Advance Directives (e.g., durable powers of attorney, health care representative designations, living wills, life prolonging procedures declarations)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

- C. I am familiar with the administration of decedents' estates, trusts and guardianships and the trial procedures related thereto and in the last 5 years regularly have advised colleagues and advised and represented clients regarding, each of the types of Trust & Estate Law Matters checked "yes" below:

<u>Type of Matter</u>	<u>Check</u>	
Supervised Estates	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Unsupervised Estates	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Estates of Non-Resident Decedents	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Trust Administrations	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Guardianships/Conservatorships	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will or Trust Contests	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Construction Actions	Yes <input type="checkbox"/>	No <input type="checkbox"/>

- D. I am familiar with the tax reporting requirements applicable to decedents' estates, trusts and guardianships, as well as the audit and trial procedures related thereto, and in the last 5 years regularly have advised prepared, reviewed or supervised the preparation of each of the types of tax returns checked "yes" in the Preparation column below and regularly have advised colleagues or advised and represented clients regarding audits or court proceedings involving each of the types of tax returns checked "yes" in the Audit column below:

<u>Forms</u>	<u>Preparation</u>		<u>Audit</u>	
Federal Estate Tax Returns (706)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Federal Gift Tax Returns (709)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Federal Fiduciary Tax Returns (1041)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Indiana Fiduciary Tax Returns (IT41)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

- E. List any Trust & Estate Law programs and courses in which you have participated as an author, co-author, lecturer, panelist or moderator. Briefly describe each program or course, showing the date, place and title of the program or course, the name of the sponsor, the capacity in which you participated and the topic on which you wrote or spoke.

- F. List any Trust & Estate Law articles, books, chapters of books or pamphlets you have authored or co-authored, showing the title, publisher and date. Do not list course materials used at programs and courses listed in Section IX(E) above.

- G. List any professional associations, committees or groups to which you belong and which relate to your special competence in Trust & Estate Law, showing the name of the association, committee or group, your positions held (with dates) and your activities as a member (with dates).

X. AGREEMENTS / AUTHORIZATION

Any amendment or alteration of this section of the Application, or failure to sign the Application, will result in disqualification of the applicant at the time the amendment or alteration is discovered.

Please read **and initial** each of the following agreements and sign below in the presence of a Notary Public:

_____ I understand any certification granted in connection with this application shall be, subject to applicable provisions of the Plan, for a period of five (5) years at which time recertification shall be permitted upon the terms and conditions established by TESB.

_____ Pursuant to the Standards that have been promulgated by TESB, I certify that I am fully qualified and know no reason why I am not entitled to certification. I have answered each question and provided all information requested in this application completely and truthfully, and all attachments are accurate and truthful.

_____ I agree to abide by the provisions of the Plan, the rules and policies of the Indiana Commission for Continuing Legal Education, and the rules and regulations promulgated by TESB as amended from time to time.

_____ I agree that I shall surrender any certificate held by me upon revocation of my certification or denial of recertification.

_____ I agree to notify the Trust & Estate Specialty Board within ten (10) days of receiving notice that I have been disciplined in any manner by the Indiana Supreme Court Disciplinary Commission or a similar designated entity in another state which has authority over attorney discipline.

_____ I agree to pay promptly all fees required by TESB when due.

_____ I agree to submit to a personal interview before TESB, any of its individual members, or any authorized representatives of TESB for the purpose of determining my qualifications for certification.

_____ I agree to supply all relevant documents, records, or other information that may be requested from me in the investigation of this application.

_____ By signing and submitting this application I authorize all persons, firms, officers, corporations, associations, state or federal agencies, and institutions to furnish to TESB, or any of its authorized representatives, all relevant documents, records or other information that may be requested in the investigation of this application, specifically including the records of grievances in possession of the Indiana Supreme Court Disciplinary Commission. I further agree that all information received by TESB shall be treated confidentially and I specifically waive any access to information received by TESB from third parties.

_____ I agree that references are confidential as set forth in Section VII of this application.

_____ I release, discharge and exonerate any person, organization or other entity furnishing information, documents, records or other information to TESB from any and all liability of every nature and kind arising from the investigation and evaluation of my application or my continued satisfaction of the Standards.

I have carefully read the foregoing application and all attachments thereto and certify that the information therein is true or true to the best of my knowledge and belief. I fully understand that failure to make a truthful disclosure of any material fact or item of information required may result in the denial of my application or revocation of my certificate of specialization, if granted.

Date of Application

Signature of Applicant

STATE OF _____)
)
COUNTY OF _____)

Subscribed and sworn to before me, a Notary Public in and for said County and State, this _____ day of _____, 20____.

County of Residence:

Notary Public

My Commission Expires:

Name Printed