

\_\_\_\_\_  
NAME OF AGENCY, DEPARTMENT, BOARD, OR COMMISSION

**MOTION FOR PRO HAC VICE ADMISSION IN AN  
AGENCY, DEPARTMENT, BOARD, OR COMMISSION**

\_\_\_\_\_  
Case No. \_\_\_\_\_

**(To be completed by associated counsel licensed in Nebraska).**

\_\_\_\_\_ hereby moves this administrative agency,  
department, board, or commission to grant \_\_\_\_\_  
admission pro hac vice in the above-captioned proceeding, as co-counsel for the  
\_\_\_\_\_.

\_\_\_\_\_ is a resident of Nebraska, duly and  
regularly admitted to practice in the courts of record of this state, and service may  
be had in all matters connected with this action.

\_\_\_\_\_, or my designee who shall be licensed  
to practice in the courts of record of this state, will sign all pleadings, motions,  
and papers filed in the case, as well as personally appear at all proceedings before  
the court, unless excused by the court.

In support of this motion, please see the attached application signed by the  
applicant.

Wherefore, \_\_\_\_\_, respectfully moves this  
administrative agency, department, board, or commission for admission pro hac  
vice for \_\_\_\_\_ in the above-captioned case.

/s/

\_\_\_\_\_  
Attorney Name (Bar Number)

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Street Address/P.O. Box Number

\_\_\_\_\_  
City/State/ZIP Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
E-mail Address

## APPLICATION FOR PRO HAC VICE ADMISSION

(To be attached to Motion for Admission Pro Hac Vice)

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

Caption: \_\_\_\_\_

Case Number: \_\_\_\_\_

\_\_\_\_\_, desiring admission pro hac vice in the above-stated matter, affirms as follows:

\_\_\_\_\_ is an attorney admitted and eligible to practice law in \_\_\_\_\_ and is a member in good standing in \_\_\_\_\_.

\_\_\_\_\_ is not the subject of a disciplinary action or investigation. (If subject to a disciplinary action or investigation, complete next paragraph).

\_\_\_\_\_ is the subject of a disciplinary action or investigation in \_\_\_\_\_ and the name and address of the disciplinary authority is:

\_\_\_\_\_  
The nature and status of the disciplinary action or investigation is

\_\_\_\_\_  
(Please attach additional pages if necessary).

\_\_\_\_\_, upon admission pro hac vice, will be subject to the Rules of Professional Conduct, Neb. Ct. R. of Prof. Cond. §§ 3-501.0 to 3-508.5.

\_\_\_\_\_ has associated with the following attorney who is duly and regularly admitted to practice in the courts of record of this state, and upon whom service may be had in all matters connected with the action:

Name of Local Counsel and Bar Number: \_\_\_\_\_ .

\_\_\_\_\_ has paid the \$250 fee to the agency,  
department, board, or commission.

/s/

\_\_\_\_\_  
Attorney Name (Foreign Bar Number)

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Street Address/P.O. Box Number

\_\_\_\_\_  
City/State/ZIP Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
E-mail Address

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NAME OF AGENCY, DEPARTMENT, BOARD, OR COMMISSION

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Case No. \_\_\_\_\_

**OATH SUBSCRIBED TO BY  
PRO HAC VICE APPLICANT**

I, the undersigned attorney, do solemnly swear that I will support the Constitution of the United States, and the Constitution of the State of Nebraska, and that I will faithfully discharge the duties of an attorney and counselor, according to the best of my ability.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ .

\_\_\_\_\_  
Attorney

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ .

\_\_\_\_\_  
Person Administering Oath pursuant to  
statutory authority for administrative agencies,  
departments, boards, or commissions.