

**Application for registration on the Roll of Advocates
practicing in the District Court Mahoba**

*Affix the self
attested colour
photograph
with band*

1. Full Name of the Advocate :
(In capital letters)

2. Father's/ Husband's Name :

3. Year of passing LL.B.
(Please attach attested copy of LL.B. Final year result/ Degree)

4. Enrollment Number
Year : State :
(Please attach attested copy of registration certificate)

5. Date of Enrollment

6. Complete postal address of Mahoba (Please attach proof)

(a) Residence :

(b) Office

7. Telephone Numbers

a)Office

b)Residence :

c) Mobile

8. E-Mail address, if any :

9. Undertaking

I declare and undertake that I am practicing in this District Court and that I have not made any application anywhere else for listing my name on the Rolls of Advocates except at this district court. I further undertake that all the information mentioned above is correct to my personal knowledge and that changes, if any, occurring therein, in the future, will be intimated, soon after, to the District Judge.

Signature of the applicant

(Name and Date)

Note: Please also attach your two recent passport size colored photograph with band. One self-attested photo be pasted on the application itself while the second photo be unattested.