**National College for DUI Defense**

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**AFFIDAVIT OF CONDUCT FOR RECERTIFICATION**

I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, being duly sworn, depose and state:

print name

Since the date of my application to the National College for DUI Defense (NCDD) for Board Certification, other than what I have previously disclosed, to my best personal knowledge, (please check all applicable boxes):

☐ No criminal charges have been filed against me;

☐ No allegations of unethical or inappropriate professional conduct have been filed against

me with any court, grievance committee, or other disciplinary board or body;

☐ No claim of professional negligence or other professional liability has been asserted

against me (with or without the filing of suit) based in any part on my acts or omissions,

or on those of any other attorney over whom I have supervisory responsibility.

If you cannot check all of the above, please attach a detailed explanation of the matter. The National College for DUI Defense may request additional information bearing on the matter, and shall determine whether the circumstances are such that the attorney should be granted certification, denied certification, have his or her certification suspended or revoked, or whether the NCDD should either take no action, or defer action pending receipt of further information. This disclosure should include material that would not otherwise be disclosed to the public in your state, unless disclosure to the NCDD is prohibited by state law and cannot be waived.

**The failure to promptly disclose the requested information is a material misrepresentation, and may be cause for refusing to grant recertification, or for revoking current certification. Affiant understands, and attest by his or her certification below, that he or she has a Continuing Duty to disclose promptly to the Board any such matters listed above which may arise, and acknowledges that a person holding Board Certification by the NCDD has a Continuing Duty to report such information. Failure to promptly report may, by itself, be cause for revocation of certification.**

**Certification**

I hereby certify that I have personally reviewed the information contained in this Recertification Affidavit of Conduct, and that it is true according to my best knowledge and belief.

Signature of Affiant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The undersigned, a Notary Public in and for the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the State of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, herewith certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ appeared in person, and before me SUBSCRIBED and SWORE to the information contained in the above Affidavit, under penalties for perjury, this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_, and to which witness my hand and seal.

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

Notary Public

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

**Stamp or Seal**  Printed Name

My commission expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.