

**INSTRUCTIONS FOR PETITIONERS FOR REINSTATEMENT  
FROM INACTIVE STATUS OR ADMINISTRATIVE SUSPENSION  
LONG FORM**

*Revised December 2025*

**Procedure**

Pursuant to 27 N.C.A.C. Chapter 1D, Rules .0902 and .0904 of the NC State Bar Rules, petitions for reinstatement from inactive status or administrative suspension (for failure to fulfill membership or CLE requirements) are reviewed by the Administrative Committee and approved by the NC State Bar Council. The committee and the council meet quarterly in January, April, July, and October.

**Instructions**

1. Print or type your responses on the petition. Date and sign the petition before a notary.
2. Pay the appropriate reinstatement fee:  
**\$125.00 if inactive** (payable to the NC State Bar)  
**\$125.00 if suspended for failure to pay membership fees** (payable to the NC State Bar)  
**\$250.00 if suspended for failure to complete CLE requirements** (payable to the NC Board of CLE)
3. Pay the **membership fees** for the year you are reinstating: **\$325.00 for 2026** (payable to the NC State Bar). Note: Pursuant to 27 N.C.A.C. Chapter 1A, Rule .0202(c), membership fees cannot be prorated. If suspended, pay any other membership, CLE, or grievance fees you may owe.
4. Attach three (3) letters of reference from people with whom you have a professional relationship who can attest to your moral qualifications, competency, and learning in the law.
5. Complete CLE requirements as outlined on the following page. Pay the **annual CLE attendance fee: \$25.00 for 2026** (payable to the NC Board of CLE).
6. Mail the petition, references, payments, and any supporting documentation to:

NC State Bar  
Membership Department  
PO Box 26088  
Raleigh, NC 27611

Or Physical Address:

NC State Bar  
Membership Department  
217 E. Edenton Street  
Raleigh, NC 27601

Submit the petition at least **30 days prior** to the quarterly meeting of the State Bar Council at which you are requesting the Council to act on the petition.

Contact Kelly Beck at [kbeck@ncbar.gov](mailto:kbeck@ncbar.gov) with questions about your reinstatement requirements.

**SEE NEXT PAGE FOR CLE REQUIREMENTS**

## CLE REQUIREMENTS

### **IF INACTIVE LESS THAN 7 YEARS:**

**STEP 1:** Provide proof of completion for any deferred CLE hours.

**STEP 2:** Provide proof of completion for 12 hours of CLE for EACH YEAR (1 year = 365 days) of inactive status (capped at 7 years, 84 hours). Of each 12-hour increment, 2 hours must be ethics. These hours must be completed no more than 2 years prior to filing the reinstatement petition.

**NOTE:** If you were actively licensed in another state during the period of inactivity and completed CLE hours to maintain that license, submit your CLE transcript or course list for review and determination if those credits satisfy the North Carolina reinstatement requirements.

### **IF INACTIVE 7 OR MORE CONSECUTIVE YEARS:**

**STEP 1:** Submit your petition, fees, and reference letters for conditional approval by the State Bar Council.

**STEP 2:** Within nine months following an order conditionally granting your reinstatement, attain a passing score on a regularly scheduled Uniform Bar Examination prepared by the National Conference of Bar Examiners, successfully complete the State-Specific Component prescribed by the North Carolina Board of Law Examiners, and attain a passing score on a regularly scheduled Multistate Professional Responsibility Examination administered by the National Conference of Bar Examiners.

**NOTE:** Each year of active licensure in another state will offset one year of NC inactive status for the purpose of calculating years of inactivity. Each year of military service will offset one year of NC inactive status for the purpose of calculating years of inactivity. **If, as a result of offsetting, you are not required to pass the bar exams, refer to the instructions for INACTIVE LESS THAN 7 YEARS above.**

### **IF SUSPENDED LESS THAN 7 YEARS:**

**STEP 1:** Provide proof of completion for any deferred CLE hours.

**STEP 2:** Provide proof of completion for 12 hours of CLE for EACH YEAR (1 year = 365 days) of suspended status (capped at 7 years, 84 hours). Of each 12-hour increment, 2 hours must be ethics. These hours must be completed no more than 2 years prior to filing the reinstatement petition.

**NOTE:** If you were actively licensed in another state during the period of suspension and completed CLE hours to maintain that license, submit your CLE transcript or course list for review and determination if those credits satisfy the North Carolina reinstatement requirements.

### **IF SUSPENDED 7 OR MORE CONSECUTIVE YEARS:**

**STEP 1:** Submit your petition, fees, and reference letters for conditional approval by the State Bar Council.

**STEP 2:** Within nine months following an order conditionally granting your reinstatement, attain a passing score on a regularly scheduled Uniform Bar Examination prepared by the National Conference of Bar Examiners, successfully complete the State-Specific Component prescribed by the North Carolina Board of Law Examiners, and attain a passing score on a regularly scheduled Multistate Professional Responsibility Examination administered by the National Conference of Bar Examiners.

**NOTE:** Each year of active licensure in another state will offset one year of NC suspended status for the purpose of calculating years of suspension. Each year of military service will offset one year of NC suspended status for the purpose of calculating years of suspension. **If, as a result of offsetting, you are not required to pass the bar exams, refer to the instructions for SUSPENDED LESS THAN 7 YEARS above.**



**THE NORTH CAROLINA STATE BAR  
REINSTATEMENT PETITION  
(Long Form)**

**For Lawyers Who Have Been Inactive or Suspended For More Than 12 Months**

All responses are to be based on your knowledge, unless your response is expressly qualified to show another source of your information. Answer **ALL** questions (if your answer is NO you must put NO) and make your answers as specific as possible. If the space for any answer is insufficient, complete your answer on a separate sheet and attach it to the petition. **Review the instruction page (attached to this petition) prior to submitting your petition to ascertain that you have met all requirements for reinstatement. PLEASE TYPE OR PRINT YOUR ANSWERS LEGIBLY.**

**Petitioner's Questionnaire and Affidavit**

1. State:

(a) Full name \_\_\_\_\_

(b) Current mailing address:

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(c) Telephone numbers: Work \_\_\_\_\_

Home \_\_\_\_\_ Mobile \_\_\_\_\_

(d) E-Mail address \_\_\_\_\_

**(Please check your e-mail for correspondence concerning your reinstatement petition.)**

(e) Have you ever been known by any other name or surname (include any name prior to marriage)?  
\_\_\_\_\_ If so, list all other names and the dates and locations where such names were used.

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

(f) Date of birth \_\_\_\_\_ Birthplace \_\_\_\_\_ Age \_\_\_\_\_

(g) Are you licensed to practice law in another state(s)? If so, what state(s) and what is your current status in that state:

\_\_\_\_\_

**FOR OFFICE USE ONLY**

ID # \_\_\_\_\_ License date \_\_\_\_\_ Date inactive / suspended \_\_\_\_\_

Reinstatement fee owed \_\_\_\_\_ Pd. \_\_\_\_\_

Membership fees owed \_\_\_\_\_ Pd. \_\_\_\_\_

JD dues owed \_\_\_\_\_ Pd. \_\_\_\_\_

CLE fees owed \_\_\_\_\_ Pd. \_\_\_\_\_

Ref. letters rec. \_\_\_\_\_

Other matters pending \_\_\_\_\_

CLE hours	PWB	Ethics	Tech	Total
Deficit				
12 hrs / Year	X		X	
Total				
Completed				

2. List all employment during the time that you were inactive or suspended, in reverse chronological order, beginning with your current employment (attach additional sheet if necessary). Include self-employment, temporary or part time work, employment by relatives, and employment with and without compensation. As to each employment state the following:

Employer \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
From (M/Y) \_\_\_\_\_ To (M/Y) \_\_\_\_\_  
Position(s) held \_\_\_\_\_  
Reason for termination \_\_\_\_\_

Employer \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
From (M/Y) \_\_\_\_\_ To (M/Y) \_\_\_\_\_  
Position(s) held \_\_\_\_\_  
Reason for termination \_\_\_\_\_

Employer \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
From (M/Y) \_\_\_\_\_ To (M/Y) \_\_\_\_\_  
Position(s) held \_\_\_\_\_  
Reason for termination \_\_\_\_\_

3. Since your admission to the North Carolina State Bar or during the seven years preceding this petition, whichever period of time is less, have you been disbarred, suspended from practice, or otherwise disciplined or disqualified (including the revocation of a pro hac vice admission, or a disability or administrative suspension) by a licensing agency or court for conduct as a lawyer or a member of any profession or organization, or holder of any public office,? \_\_\_\_\_

If your answer is YES, provide the following information:

- (a) Nature of discipline, suspension, or disqualification;
- (b) Date of discipline, suspension, or disqualification;
- (c) Name/address of person or body with possession of the record;
- (d) Reason(s) for the discipline, suspension, or disqualification.

Attach copies of all documents relating to such discipline, suspension, or disqualification including the order of discipline or disqualification.

4. Since your admission to the North Carolina State Bar or during the seven years preceding this petition, whichever period of time is less, have any grievances, complaints or charges been filed or proceedings\* instituted against you in any bar, court, or licensing agency? \_\_\_\_\_

If your answer is YES, provide the following information (do not repeat the information provided in response to Question 3.):

- (a) Nature of grievance, complaint or charge;
- (b) Name/address of person or entity making the grievance, complaint or charge;
- (c) Date of grievance, complaint or charge;
- (d) Disposition of grievance, complaint or charge;
- (e) Name/address of person or entity with possession of the record relating to the grievance, complaint or charge.

Attach copies of all documents relating to the grievance, complaint or charge.

\_\_\_\_\_  
\*Please provide information on complaints concerning your professional conduct as a lawyer or as some other licensed professional. Do not include information about civil proceedings in which you are a party, such as marital, collections or malpractice actions.

5. Since your admission to the North Carolina State Bar or during the seven years preceding this petition, whichever period of time is less, have you been charged with, arrested or convicted of a violation of any law (excluding infractions in which an appearance in court may be waived by paying a fine)? \_\_\_\_\_

If your answer is YES, provide the following information:

- (a) Name and location of the tribunal;
- (b) Date, case number, and caption of the pleadings;
- (c) The nature of the proceeding;
- (d) Disposition;
- (e) Location of the record relating to the proceeding.

6. Since your admission to the North Carolina State Bar or during the seven years preceding this petition, whichever period of time is less, have you been charged with fraud in any legal proceeding, civil or criminal (include charges for fraudulent conveyance, preference or unlawful concealment of assets)? \_\_\_\_\_

If your answer is YES, provide the following information:

- (a) Name and location of the tribunal;
- (b) Date, case number, and caption of the pleadings;
- (c) The nature of the proceeding;
- (d) Disposition;
- (e) Location of the record relating to the proceeding.

7. Since your admission to the North Carolina State Bar or during the seven years preceding this petition, whichever period of time is less, have you timely filed state and federal tax returns and paid all taxes when due for each and every year or, if you have not, obtained prior authorization from the taxing authority to file or pay late? \_\_\_\_\_

If your answer is NO, provide the year, taxing authority, and the current status of the delinquency for each year in which, without prior authorization from the taxing authority, you did not timely file a tax return and/or did not pay all taxes when due.

8. Since your admission to the North Carolina State Bar or during the seven years preceding this petition, whichever period of time is less, were you (1) declared legally incompetent; (2) impaired<sup>1</sup> as a result of a mental, emotional or psychiatric disorder or condition; (3) impaired as a result of the use of alcohol or drugs; or (4) told that you were, or are, impaired as a result of a mental, emotional or psychiatric disorder or condition or the use of alcohol or drugs? \_\_\_\_\_

If your answer is YES, provide the following information:

- (a) For an incompetency proceeding: provide the name and location of the tribunal; dates, case number and caption of the proceeding; disposition; and the location of the record relating to the proceeding.
- (b) Identify all involuntary admissions to a treatment facility; provide the name and address of the facility, the dates of admission and the reason for each admission.
- (c) Dates of impairment or notice of impairment,
- (d) Names and mailing addresses of the person(s) who told you that you were impaired.
- (e) If you were treated by any professional or institution, or have been in a program of recovery for alcohol or drug use, provide the name and mailing address of each professional, institution or program.
- (f) Direct each treatment facility or treating professional to furnish to the State Bar any information that the State Bar may request with respect to any such impairment and treatment.

9. During the time you were inactive or suspended, did you engage in the practice of law in North Carolina?  
\_\_\_\_\_

If your answer is YES, provide a statement explaining when and where you practiced law and why you did so.

10. State the reason you desire readmission to the North Carolina State Bar and provide an explanation of your anticipated employment.

11. Is there any reason why your resumption of the practice of law may be detrimental to the integrity and standing of the Bar, or subversive of the administration of justice or the public interest? \_\_\_\_\_

If your answer is YES, provide an explanation including a description of any relevant conduct.

By executing this petition, you acknowledge that you have answered each question truthfully and completely.

\_\_\_\_\_  
Signature Date

Sworn to and subscribed before me this  
\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
<sup>1</sup> For purposes of this and all other questions, the term “impaired” or “impairment” means limited in your ability to carry on any life activities to an extent that would have adversely affected your ability to practice law. The ability to practice law requires, among other attributes, an accurate perception of reality, honesty, and the capacity to comprehend facts and circumstances, to reason logically, to communicate, to recognize and appropriately resolve ethical dilemmas, and to perform legal tasks in a timely manner.

## **Authorization and Consent to Release Information**

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

I hereby consent to the disclosure of any information relating to any grievance filed against me with the Grievance Committee of the North Carolina State Bar and authorize the release of any information relating thereto to the Administrative Committee of the North Carolina State Bar for the purpose of evaluating this petition for reinstatement.

I understand that I may revoke this consent to release information in writing at any time, except to the extent that action has been taken in reliance thereon. I agree that the Administrative Committee of the North Carolina State Bar will be notified upon any revocation of this release.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date