



Tennessee Commission on Continuing Legal Education

1321 Murfreesboro Pike, Suite 810 • Nashville, Tennessee 37217

Office: 615-741-3096 • Fax: 615-532-2477 • Email: info@cletn.com

REQUEST FOR INACTIVE STATUS

Name _____ TN BPR No. _____

Email: _____ Phone: _____

I DO HEREBY SWEAR OR AFFIRM THAT:

1. I am no longer practicing law in any United States jurisdiction.
2. I stopped practicing law on _____.
3. I have paid all fees owed to the TN Commission on Continuing Legal Education.
4. I have attached a copy of the letter from the TN Board of Professional Responsibility confirming that I have placed my Tennessee law license on inactive status with them.
5. I am requesting to be placed on inactive status with the TN Commission on Continuing Legal Education.
6. Before I begin practicing law in any U.S. jurisdiction, I understand that I must:
 - a. Make up the last five years of CLE I missed while inactive. No exemptions apply.
 - b. Notify the TN Commission on Continuing Legal Education, in writing, to reactivate my CLE account.
7. I understand that returning to the practice of law in any U.S. jurisdiction without first complying with the requirements of item six (6) above will result in the immediate suspension of my Tennessee law license by the Tennessee Supreme Court.

Signature: _____ Date: _____