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STATE BAR OF NEVADA



Member Services 3100 W. Charleston Blvd., Suite 100 Las Vegas, NV 89102 (702) 382-2200 or memberservices@nvbar.org

Voluntary Request for SCR 93.7 Transfer to Active Status

Contact information will not be updated with the information provided below. Please update contact information online via your account at www.nvbar.org.

Bar No.:	Attorney Name:		_
Phone Number:	E-mai	1:	
SCR 79 Address:			
City:		, State:	Zip:
effective /	be enrolled as an ACTIVE licensee / Status change will not b s have been submitted.		
•	ation fee, full annual membership fe		
Active Membership Re	equirements:		
☐ Enclosed is my cho	eck, payable to the State Bar of Nev	vada, or I have paid via c	eredit card.
☐ Enclosed is my tru	st account reporting form (Certifica	ation of Compliance and	Consent).
☐ Enclosed is my ins	surance disclosure.		
☐ Enclosed is my Ch	nange of Address form or I have upon	dated my contact inform	ation online.
Annual MCLE requi	rement is:		
10 general credits, 2 et	hics credits, 1 substance abuse cred	it; Affirmation of Attend	lance and annual fee.
Credits and Affirmatio	on are due by December 31 each year	nr.	
	tamps will not be accepted.)	Date	