

2024

APPLICATION FOR ADMISSION OR RENEWAL OF ADMISSION TO PRACTICE
BEFORE THE TRIBAL COURT AND TRIBAL COURT OF APPEALS OF
THE CONFEDERATED SALISH AND KOOTENAI TRIBES
OF THE FLATHEAD RESERVATION
For Tribal Court Advocates

Name: _____
CSKT Department: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone #: (____) _____ - _____ Fax #: (____) _____ - _____
Email address: _____

Pursuant to CSKT Laws Codified, § 1-2-504, I verify that I am an individual employed by CSKT and request to be admitted to practice before the Tribal Court as a Tribal Court Advocate.

The CSKT attorney, _____, hereby verifies my employment with CSKT and certifies that I am qualified to represent individuals in actions and proceedings before the Tribal Court.

I agree to act as an officer of the Tribal Court in any action or proceeding in which I appear and to conduct my legal practice in accord with the Rules of Professional Conduct.

The admission fee of **\$100.00** for the **2024** calendar year is waived based on my status as a CSKT employee.

Signed: _____ Date: _____
Tribal Court Advocate

Signed: _____ Date: _____
Tribal Attorney

Return to: Clerk of Tribal Court
Confederated Salish and Kootenai Tribes
P. O. Box 278
Pablo, MT 59855