

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND**

IN RE:

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REQUEST FOR SPECIAL APPEARANCE AND CM/ECF ACCESS

TO THE CLERK OF COURT:

I have been appointed as an attorney in the _____ for the District of Maryland. I am not a member of this Court's bar but I am a member in good standing of the bar of the highest state court of _____, and I otherwise satisfy the admission requirements of Local Rule 701.1.b.

I understand that (1) I must register to use CM/ECF within **fourteen (14) days** of approval of this request, (2) I will enter my own appearances in CM/ECF in all cases; (3) this request for entry of appearance and CM/ECF access is valid for the length of my employment in the District of Maryland; and (4) I will notify the Clerk's Office when my employment changes and impacts my ability to appear before this Court pursuant to this request.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Date

Signature

Printed name

Agency Name and Address

Telephone Number

Fax Number

Email Address

Email your completed form to MDD_AttyAdmissions@mdd.uscourts.gov.