

Judicial Branch of Puerto Rico

Supreme Court Office of the Clerk of the Court

CERTIFICATION OF ATTORNEY IN CHARGE OF A LEGAL CLINIC AT A LAW SCHOOL ACCREDITED BY THE SUPREME COURT OF PUERTO RICO¹

I hereby certify that			(RUA No.:)
, ,	First name	Last names		,
teaches or is otherwise i	n charge of the _	Title	law school clir	nic at
Name of Univers	, ai	nd that the aforeme	entioned attorney has	s not
tendered his/her resign	nation as of the o	date of this certifica	tion nor is there pres	ently
any order in place to re	move him/her fro	om service. I further c	certify that the inform	ation
provided herein is corre	ct.			
Contact information of t Full name:	-			
Telephone:	Email:			
Signature:		Date of certificatio		ear
UNIVERSITY OFFICIAL STAMP				

¹ This certification must be attached to the declaration the attorney must file electronically in *Sistema Unificado de Manejo y Administración de Casos* (SUMAC) under the section titled "Declaraciones".