

RL APPLICATION AFFIDAVIT

STATE OF _____

COUNTY OF _____

Before me, a Notary Public, on this _____ day of, _____, _____, personally appeared,
(date) (month) (year)

_____, who after being duly sworn by me, declared:
(applicant's full name)

I have read the instructions and inquiries that constitute the Registered Landman application process. I have responded to all inquiries fully and frankly, and all information contained in my application is true and correct. I understand that any misstatement of facts deemed material is ground for denial of my application. All documents that I have provided or will provide to the Certification Committee, that are not required to be certified copies, are, to the best of my knowledge, true and correct copies of the original documents. I am submitting my application in good faith and belief that I am eligible to become a Registered Landman. I know of no reason why I would not be qualified for certification.

I HAVE READ AND UNDERSTAND THE CURRENT AAPL POLICY MANUAL AS OUTLINED IN THE AAPL MEMBERSHIP DIRECTORY. I UNDERSTAND THAT THE RESPONSES SUBMITTED ON THIS APPLICATION AND ALL ATTENDANT FORMS ARE SUBMITTED UNDER OATH AND THAT FAILURE TO RESPOND TO ANY INQUIRY OR TO DISCLOSE FULLY AND ACCURATELY ALL FACTS AND INFORMATION CALLED FOR HEREIN MAY RESULT IN DENIAL OF MY APPLICATION AND/OR REFERRAL TO THE AAPL ETHICS COMMITTEE.

I hereby authorize the Certification Committee to verify all information pertaining to my eligibility. I further agree that in the event that certification is not granted to me, or if granted and later withdrawn for ethical or competency reasons or for failure to meet continuing education requirements, I will make no claim against the American Association of Professional Landmen, its Board of Directors, any committee or any individual member.

Furthermore, I pledge that if I am accepted as a Registered Landman, I will endeavor to maintain a high degree of professional competence, ethical, moral and professional integrity and will endeavor to raise the land profession to its highest level.

(signature of applicant)

Subscribed and sworn to me on this _____ day of, _____, _____,
(date) (month) (year)

(seal)

(signature of notary)

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