

Did you:

- 1. Review your application for completeness.**
- 2. Sign the acknowledgement before a notary public or commissioner of the superior court.**
- 3. Attach all the required forms (your individual case may require you to file forms in addition to those listed below):**
 - 1) Form M1 (Application)**
 - 2) Form M4 (Affidavit of Good Standing)**
 - 3) Form M5 (Certificate of Intention)**
 - 4) Form M6 (Summary sheet)**
 - 5) Form M7 (Return address labels)**
 - 6) Form M8 (Certificate of actual practice and/or clinical supervision)**
 - 7) Form M9 (Status sheet)**

Note: Forms M12 (personal references), M13 (affidavit of Connecticut attorney), M14 (affidavit of attorney) and M22 (employer references) should be sent directly to the CBEC by the affiants. If applicable, Forms M15 (affidavit(s) of agency supervisor or commanding officer), M16 (affidavit of CT law school Dean) and M17 (affidavit(s) from other law school Dean(s)) should be sent directly to the CBEC by the affiants. Form M21 should come directly from the law school with your transcript and law school application.

4. Enclose a certified check or money order in the amount of \$1800.00 payable to: Connecticut Bar Examining Committee. (Note: Fees are not refundable!!)

Send your application, required supporting documents and fee to:

**Connecticut Bar Examining Committee
Motion Application Department
100 Washington Street
Hartford, CT 06106-4411**

Form M1

- Yes No 9. Have you ever been known by any other name including birth name (other than those listed in Questions 1 & 2 and other than a nickname such as "Bob" for "Robert")? List all such names and dates and places of use.

Name _____	Reason for use _____	
Dates of use _____	From _____ To _____	Places of use _____

Name _____	Reason for use _____	
Dates of use _____	From _____ To _____	Places of use _____

- Yes 10. Check the appropriate box below:

- I am a natural born citizen of the United States
- I am a naturalized citizen of the United States. (Attach a copy of your naturalization certificate)
Date of naturalization: _____
- I am an alien lawfully residing in the United States. (Describe your immigration status and provide your alien registration number and a copy of your resident alien card. If you do not have an alien registration number or resident alien card, explain and attach a copy of your INS issued documents.)

SECTION II. MULTISTATE PROFESSIONAL RESPONSIBILITY EXAMINATION

11. Check the option below on which you intend to rely to fulfill the requirement of Article IV: Check only one box.

- I have taken/will take the Multistate Professional Responsibility Examination on _____ and have requested/will request that my score be sent to the Connecticut Bar Examining Committee.
- I have completed/will complete a course on Professional Responsibility/Legal Ethics on _____ at a law school approved by the Connecticut Bar Examining Committee

SECTION III. AFFIDAVITS

12. List the names and complete addresses of three persons unrelated to each other with whom you are personally acquainted and who are not related to you by blood or marriage. Personal references in this question may NOT be the same people supplying employer references required in Question #22. You must provide a Form M12 to each person named below for completion and transmittal to the Bar Examining Committee.

Name	_____		
Street	_____		
City	State	Zip Code	

Name	_____		
Street	_____		
City	State	Zip Code	

Name	_____		
Street	_____		
City	State	Zip Code	

Form M1

13. List the names and complete addresses of two Connecticut attorneys, not related to you by blood or marriage, who have been admitted to the Connecticut bar for at least five years and will supply affidavits (Forms M13) that will certify facts relating to your character.

Name	_____	
Street	_____	
City	State	Zip Code

Name	_____	
Street	_____	
City	State	Zip Code

14. List the names of two attorneys, not related to you by blood or marriage, who have been admitted to practice law in the reciprocal jurisdiction(s) in which you are admitted, who have been admitted in such reciprocal jurisdiction(s) for at least five years and will supply affidavits (Forms M14) that will certify facts relating to your character.

Name	_____	
Street	_____	
City	State	Zip Code

Name	_____	
Street	_____	
City	State	Zip Code

15. List the name(s) of the state, federal or territorial agency (agencies), including military service, for which you currently serve and/or have served as a lawyer, the supervisor(s) or commanding officer(s) of which will supply an affidavit (Form M15) that will certify facts relating to your employment relationship and term. Please note: Form M15 must be supplied in addition to Form M22.

NA

Name	_____
City, State	_____

Name	_____
City, State	_____

16. List the name of the accredited Connecticut law school at which you have accepted employment and intend, upon a continuing basis, to supervise law students within a clinical law program while you are a member of the faculty, the Dean of which will supply an affidavit (Form M16) that will certify facts relating to your employment relationship and term. Please note: Form M16 must be supplied in addition to Form M22.

NA

Name	_____
City, State	_____

Name	_____
City, State	_____

Form M1

17. List the name(s) of the accredited law school(s) at which you currently supervise and/or have supervised law students within a clinical program while a member of the faculty, the Dean(s) of which will supply an affidavit (Form M17) that will certify facts relating to your employment relationship and term. Please note: Form M17 must be supplied in addition to Form M22.

NA

Name _____
City, State _____

Name _____
City, State _____

SECTION IV. RESIDENCES

18. List in chronological order (from oldest to most recent) every residence, permanent or temporary, for more than thirty days, since your eighteenth birthday or for the last ten years, whichever is shorter. Attach a Form M2 with additional residences if necessary.

From:		To:	
Street			
City			
State	Zip Code		

From:		To:	
Street			
City			
State	Zip Code		

From:		To:	
Street			
City			
State	Zip Code		

From:		To:	
Street			
City			
State	Zip Code		

From:		To:	
Street			
City			
State	Zip Code		

From:		To:	
Street			
City			
State	Zip Code		

From:		To:	
Street			
City			
State	Zip Code		

SECTION V. EDUCATION

Yes No 19. Have you ever been expelled, suspended, placed on probation or been the subject of or party to any disciplinary proceeding by any college, university or law school? If so, explain on Form M2.

Yes No 20. Have you ever been absent from any post-secondary educational institution for more than ten consecutive days, other than for regularly scheduled school vacations? If so, explain on Form M2.

21. List in chronological order (from oldest to most recent) all colleges and universities attended (INCLUDING LAW SCHOOLS). If no degree was received, explain. Each law school must submit Form M21 directly to the Bar Examining Committee with the official, final transcript (a student copy is NOT acceptable) and a copy of your application for admission to that law school attached.

School _____	Degree _____
City _____	State _____
Zip Code _____ From _____	To _____
Explanation for no degree: _____	

School _____	Degree _____
City _____	State _____
Zip Code _____ From _____	To _____
Explanation for no degree: _____	

School _____	Degree _____
City _____	State _____
Zip Code _____ From _____	To _____
Explanation for no degree: _____	

School _____	Degree _____
City _____	State _____
Zip Code _____ From _____	To _____
Explanation for no degree: _____	

School _____	Degree _____
City _____	State _____
Zip Code _____ From _____	To _____
Explanation for no degree: _____	

School _____	Degree _____
City _____	State _____
Zip Code _____ From _____	To _____
Explanation for no degree: _____	

School _____	Degree _____
City _____	State _____
Zip Code _____ From _____	To _____
Explanation for no degree: _____	

School _____	Degree _____
City _____	State _____
Zip Code _____ From _____	To _____
Explanation for no degree: _____	

SECTION VI. EMPLOYMENT AND LAW PRACTICE

22. Beginning with your sixteenth birthday or for the last ten years, whichever is shorter, list in chronological order (from oldest to most recent) the name of each employer. Include any periods of self-employment or unemployment. You must send a Form M22 to each employer named below covering the past five years for completion and transmittal to the Bar Examining Committee. **Exceptions to this are set forth in the instructions for Form M22.** For type of position use the following: P = Paid; CU = For Academic Credit and Unpaid; CP = For Academic Credit and Paid; or V = volunteer. Attach Form 22A if you need to list more than five employers

From _____	To _____
Name _____	
Street _____	
City _____	State _____ Zip Code _____
Position held _____	Type _____
Supervisor _____	Type of business _____
Reason for leaving _____	

From _____	To _____
Name _____	
Street _____	
City _____	State _____ Zip Code _____
Position held _____	Type _____
Supervisor _____	Type of business _____
Reason for leaving _____	

From _____	To _____
Name _____	
Street _____	
City _____	State _____ Zip Code _____
Position held _____	Type _____
Supervisor _____	Type of business _____
Reason for leaving _____	

From _____	To _____
Name _____	
Street _____	
City _____	State _____ Zip Code _____
Position held _____	Type _____
Supervisor _____	Type of business _____
Reason for leaving _____	

From _____	To _____
Name _____	
Street _____	
City _____	State _____ Zip Code _____
Position held _____	Type _____
Supervisor _____	Type of business _____
Reason for leaving _____	

- Yes No 23. Have you ever been discharged or terminated by an employer? If so, explain on Form M2.
- Yes No 24. Have you ever resigned or been requested to resign in lieu of impending or anticipated disciplinary action by an employer? If so, explain on Form M2.
- Yes No 25. Have you ever been absent from a job for more than ten consecutive work days, other than regularly scheduled vacations? If so, explain on Form M2.

Form M1

26. List below all applications for admission to the bar and/or to sit for the bar examination filed in a jurisdiction other than Connecticut. This must also include (1) applications which you have filed or intend to file to sit for an upcoming bar examination, (2) registration as a law student, (3) an application for reinstatement, (4) any application subsequently withdrawn, (5) applications for authorized house counsel and (6) applications for foreign legal consultant. Submit a copy of each application filed within the last ten years. If a copy of an application is not available, you must submit a letter from the appropriate authority attesting to that fact.

Jurisdiction _____	Date Filed _____
Type: <input type="checkbox"/> Exam <input type="checkbox"/> Motion/reciprocity <input type="checkbox"/> Law Student Registration <input type="checkbox"/> Reinstatement <input type="checkbox"/> Other	
Current status (e.g.: pending, pass, fail, withdrawn)	

Jurisdiction _____	Date Filed _____
Type: <input type="checkbox"/> Exam <input type="checkbox"/> Motion/reciprocity <input type="checkbox"/> Law Student Registration <input type="checkbox"/> Reinstatement <input type="checkbox"/> Other	
Current status (e.g.: pending, pass, fail, withdrawn)	

Jurisdiction _____	Date Filed _____
Type: <input type="checkbox"/> Exam <input type="checkbox"/> Motion/reciprocity <input type="checkbox"/> Law Student Registration <input type="checkbox"/> Reinstatement <input type="checkbox"/> Other	
Current status (e.g.: pending, pass, fail, withdrawn)	

27. List the jurisdictions in which you are or have ever been a member of the bar. Submit a certificate of good standing for each jurisdiction. Original letters of good standing must be received in the CBEC Administrative Office no later than thirty (30) days after issuance. If you are not in good standing, explain.

Jurisdiction _____	Date of admission _____	License Number _____
Good standing	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Jurisdiction _____	Date of admission _____	License Number _____
Good standing	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Jurisdiction _____	Date of admission _____	License Number _____
Good standing	Yes <input type="checkbox"/>	No <input type="checkbox"/>

- Yes No 28. Have you ever been reprimanded, suspended, disbarred or otherwise disciplined, or are there any charges or complaints pending against you as an attorney, or have you ever been accused of the unauthorized practice of law, or have you ever resigned or been requested to resign from the bar in lieu of impending or anticipated disciplinary action? If so, explain on Form M2.

- Yes No 29. Have you been entitled to practice law in each of the jurisdictions specified in Question 27 above and before each court continuously from the date you first became entitled until the date hereof? If not, state the dates during which you have not been so entitled, the nature of the disqualification, and the name and address of the person or authority in possession of the record thereof.

Jurisdiction _____	Dates of disqualification	From _____	To _____
Nature of disqualification _____			
Name of recordholder _____			
Address of recordholder _____			

SECTION VIII. GENERAL QUESTIONS

Yes No 34. Have you failed to file any local, state or federal income tax return as required by law or failed to pay any taxes when due? If yes, give full details on Form M2 and furnish documentation showing that taxes are current.

Yes No 35. Have you ever been offered or been granted immunity, or have you ever testified or been called as a witness in any criminal action or proceeding in which you were not a party? If so, explain on Form M2.

Yes No 36. Have you ever applied for or held a license or permit, other than as an attorney at law, the procurement of which required proof of good character? If so state the name of authority to whom the application was made, the date granted or denied and the current status of that license or permit.

Type of license/permit		Name of authority	
Granted	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date	Current status

Type of license/permit		Name of authority	
Granted	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date	Current status

Yes No 37. Have you had any license or permit suspended or revoked because of unprofessional conduct? If so, explain on Form M2.

Yes No 38. Have you ever been bonded?

Yes No 39. If so, have you ever been refused a bond or has anyone ever sought to recover on or cancel such bond? If so, explain on Form M2.

NA

Questions 40 – 44 address recent mental health and chemical or psychological dependency matters. The Committee asks these questions because of its responsibility to protect the public by determining the current fitness of an applicant to practice law, and the purpose of these questions is to determine an applicant's current fitness to practice law. This information, along with all other information, is treated confidentially by the Committee and the Administrative Office. Each applicant is considered on an individual basis. The mere fact of treatment for mental health problems or chemical or psychological dependency is not, in and of itself, a basis on which an applicant is ordinarily denied admission to the Connecticut bar. The Connecticut Bar Examining Committee regularly recommends licensing of individuals who have demonstrated personal responsibility and maturity in dealing with mental health and chemical or psychological dependency issues. The Committee encourages applicants who may benefit from treatment to seek it, and the Committee views such treatment as a positive factor in evaluating an application. As indicated in the Rules, all proceedings conducted pursuant to the Rules and Regulations are confidential.

On occasion a license may be denied when an applicant's ability to function is impaired in a manner relevant to the practice of law at the time that the licensing decision is made, or when an applicant demonstrates a lack of candor by his or her responses. Protection of the public that will receive legal services underlies the licensing responsibilities assigned to the Committee. Furthermore, each applicant is responsible for demonstrating that he or she possesses the qualifications necessary to practice law. Your response may include information as to why, in your opinion or that of your treatment provider, your condition will not affect your ability to practice law in a competent and professional manner.

The Connecticut Bar Examining Committee does not, by its questions, seek information that is characterized as situational counseling, such as stress counseling, domestic counseling, and grief counseling. Generally, the Committee does not view these types of counseling as germane to the issue of whether an applicant is qualified to practice law.

If you answer "YES" to Questions 40, 43 and/or 44, complete Forms M40A & M40B. Make as many copies of the forms as you need to describe the events.

- | | | | |
|---------------------------------|--------------------------------|-----|--|
| Yes
<input type="checkbox"/> | No
<input type="checkbox"/> | 40. | Do you currently have any condition or impairment (including but not limited to substance abuse, alcohol abuse or a mental, emotional or nervous disorder or condition) which in a material way affects your ability to practice law in a competent and professional manner? "Currently" means recently enough so that the condition could reasonably have an impact on your ability to function as a lawyer. |
| Yes
<input type="checkbox"/> | No
<input type="checkbox"/> | 41. | If your answer to Question 40 is "YES", are the limitations or impairments caused by your condition or impairment reduced or ameliorated because you receive ongoing treatment (with or without medication) or because you participate in a monitoring program? |
| NA
<input type="checkbox"/> | | | |
| Yes
<input type="checkbox"/> | No
<input type="checkbox"/> | 42. | Within the past five years, have you ever raised the issue of consumption of drugs or alcohol or the issue of a mental, emotional, nervous or behavioral disorder or condition as a defense, or in mitigation or explanation of your actions in the course of any administrative or judicial proceeding or investigation, or in any other inquiry or proceeding, or in any proposed termination by an educational institution, employer, government agency, professional organization or licensing authority? If so, explain on Form 2. |
| Yes
<input type="checkbox"/> | No
<input type="checkbox"/> | 43. | Since you graduated from college or for the past five years, whichever is shorter, have you engaged in any conduct or behavior which caused you to be voluntarily or involuntarily hospitalized for treatment of a mental, emotional, nervous or behavioral disorder or condition? |
| Yes
<input type="checkbox"/> | No
<input type="checkbox"/> | 44. | During the last five years, have you engaged in any conduct or behavior which caused you to be voluntarily or involuntarily treated for any of the following: schizophrenia or other psychotic disorder, bipolar or major depressive mood disorder; drug or alcohol abuse; impulse control disorder, including kleptomania, pyromania, explosive disorder, pathological or compulsive gambling; or paraphilia such as pedophilia, exhibitionism, or voyeurism? If yes, identify for which of the listed conditions you were treated, state the beginning and ending dates of each treatment, and the name and complete address of the treating doctor or professional. Direct each such doctor or professional to furnish to the Committee any information the committee may request with respect to any such treatment. |

SECTION IX. CREDIT

Questions 45 and 46 are limited to the last ten years

- Yes No 45. Are you presently in arrears or have you ever been in default in the performance of the obligation on a student loan? If so, list each such loan, the name of the creditor, account number, amount owed and the steps you have taken to bring the account up to date.

Creditor _____		
Account number _____	Amount _____	
Steps to bring current _____		

Creditor _____		
Account number _____	Amount _____	
Steps to bring current _____		

Creditor _____		
Account number _____	Amount _____	
Steps to bring current _____		

- Yes No 46. Has judgment ever entered against you in favor of a creditor? If so, submit a copy of the complaint, answer, judgment and satisfaction of judgment.

Creditor _____		
Amount _____	Judgment satisfied Yes <input type="checkbox"/> No <input type="checkbox"/>	
Forum _____		

Creditor _____		
Amount _____	Judgment satisfied Yes <input type="checkbox"/> No <input type="checkbox"/>	
Forum _____		

SECTION X. CIVIL PROCEEDINGS

Questions 47 - 51 are limited to the last ten years

- Yes No 47. Are you in arrears or default in the performance of any court ordered duty or obligation? If so, submit a copy of the order and on Form M2 an explanation of the steps you have taken to remedy the arrearage or default.

- Yes No 48. Are you presently, or have you ever been, in arrears or default in the performance of any court approved agreement, judgment or court order concerning child support? If so, supply all documentation pertaining thereto and a statement on Form M2 outlining the steps you are presently taking to remedy such arrearage or default.

- Yes No 49. Have you ever filed a grievance against an attorney or a judge? If so, explain on Form M2.

Form M1

Yes No 50. Have you ever been a defendant in any civil proceeding in which allegations of fraud, misrepresentation or other improper conduct were made against you. If so, provide the information below and submit a copy of the complaint, answer, judgment and any pending motions.

EXAMPLE

A.	Title of case	Jones v. Smith
B.	Name of forum	Hartford Superior Court
C.	Docket number	CV-02-001
D.	Date filed	01 Jan 02
E.	Nature of case	Personal injury
F.	Your position in case	Defendant
G.	Your attorney	Jane Doe
H.	Opposing attorney	Elizabeth Green
I.	Current status or disposition	Verdict for plaintiff

PHOTOCOPY AS NECESSARY

A.	Title of case	_____
B.	Name of forum	_____
C.	Docket number	_____
D.	Date filed	_____
E.	Nature of case	_____
F.	Your position in case	_____
G.	Your attorney	_____
H.	Opposing attorney	_____
I.	Current status or disposition	_____

A.	Title of case	_____
B.	Name of forum	_____
C.	Docket number	_____
D.	Date filed	_____
E.	Nature of case	_____
F.	Your position in case	_____
G.	Your attorney	_____
H.	Opposing attorney	_____
I.	Current status or disposition	_____

Yes No 51. Except as provided in Questions 46 and 50 above, have you ever been a party to any civil proceeding or has any civil proceeding been instituted by you, on your behalf or against you including, but not limited to, suits in equity, actions at law, suits or petitions in bankruptcy, statutory proceedings, competency or commitment proceedings, divorce, civil restraining orders, guardianship, probate, paternity, or any other civil and administrative proceeding?

A.	Title of case	_____
B.	Name of forum	_____
C.	Docket number	_____
D.	Date filed	_____
E.	Nature of case	_____
F.	Your position in case	_____
G.	Your attorney	_____
H.	Opposing attorney	_____
I.	Current status or disposition	_____

A.	Title of case	_____
B.	Name of forum	_____
C.	Docket number	_____
D.	Date filed	_____
E.	Nature of case	_____
F.	Your position in case	_____
G.	Your attorney	_____
H.	Opposing attorney	_____
I.	Current status or disposition	_____

SECTION XI. CRIMINAL AND MOTOR VEHICLE PROCEEDINGS

Yes No 52. Have you ever been convicted of a criminal charge, been acquitted by reason of mental disease or defect, entered a pretrial diversion program or been the respondent in a criminal protective order or a family violence temporary restraining order? If so, submit a copy of the arrest report and all other documents relating to each conviction, acquittal by reason of mental disease or defect, pretrial diversion program, criminal protective order or family violence temporary restraining order. Submit an affidavit reciting in detail the facts and circumstances of each reported event.

SAMPLE

A.	Title of case	State v. Smith
B.	Name of forum	Hartford Superior Court
C.	Docket number	CR-02-001
D.	Date of conviction/disposition	01 Jan 02
E.	Conviction offense	Larceny 3
F.	Initial charge (if different)	Grand theft auto

A.	Title of case	_____
B.	Name of forum	_____
C.	Docket number	_____
D.	Date of conviction/disposition	_____
E.	Conviction offense	_____
F.	Initial charge (if different)	_____

Yes No 53. Are there any criminal charges pending against you? If so, submit a copy of the arrest report and all other documents related to each pending charge. Submit an affidavit reciting in detail the facts and circumstances related to each pending charge.

SAMPLE

A.	Title of case	State v. Smith
B.	Name of forum	Hartford Superior Court
C.	Docket number	CR-02-001
D.	Date of arrest	01 Jan 02
E.	Date of trial	01 Feb 02
F.	Offense charged	Grand theft auto

A.	Title of case	_____
B.	Name of forum	_____
C.	Docket number	_____
D.	Date of arrest	_____
E.	Date of trial	_____
F.	Offense charged	_____

Form M1

Yes No 54. Within the last five years, have you been charged with reckless driving, evading responsibility, driving under the influence (DUI) or driving while intoxicated (DWI)? On Form M2 submit a narrative of the events related to each charge.

SAMPLE

A.	Jurisdiction	Connecticut
B.	Date of charge	01 Jan 02
C.	Docket number (if any)	n/a
D.	Initial charge	DWI
E.	Current status or disposition	reckless driving

A.	Jurisdiction	_____
B.	Date of charge	_____
C.	Docket number (if any)	_____
D.	Initial charge	_____
E.	Current status or disposition	_____

A.	Jurisdiction	_____
B.	Date of charge	_____
C.	Docket number (if any)	_____
D.	Initial charge	_____
E.	Current status or disposition	_____

None 55. List every jurisdiction in which you hold or have ever held a motor vehicle driver's license or operator's permit. Submit a **certified** driving record* from the Department of Motor Vehicles from each of the following:
 1. Every jurisdiction in which you hold a motor vehicle driver's license or operator's permit;
 2. Any jurisdiction during the past five years in which you have resided for sixty days or more, whether or not you ever held a driver's license or operator's permit in that jurisdiction; AND
 3. Any jurisdiction in which your driving privileges have ever been suspended or revoked.

Original certified driving records and no record or clearance letters must be received in the CBEC Administrative Office **no later than sixty (60) days** after issuance for jurisdictions in which you are currently licensed and/or currently reside (whether permanent or temporary).

On Form M2 provide a narrative for each suspension or revocation.
 (* or a letter of clearance or no record/no history letter, as may be applicable)

SAMPLE

A.	Jurisdiction	Connecticut
B.	<input checked="" type="checkbox"/> License or permit held	<input type="checkbox"/> Resided for 60 days or more <input checked="" type="checkbox"/> Driving privileges suspended or revoked
B.	Date held	01 Jan 80 – present
C.	Type of license/permit	passenger car and motorcycle license
D.	Current status	active
E.	Ever revoked/suspended	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Suspended from 9/1/01 To 12/1/01

A.	Jurisdiction	_____
B.	<input type="checkbox"/> License or permit held	<input type="checkbox"/> Resided for 60 days or more <input type="checkbox"/> Driving privileges suspended or revoked
C.	Date held	From _____ To _____
D.	Type of license/permit	_____
E.	Current status	_____
F.	Driving privileges ever revoked/suspended	Yes <input type="checkbox"/> No <input type="checkbox"/> Suspended from _____ To _____

A.	Jurisdiction	_____
B.	<input type="checkbox"/> License or permit held	<input type="checkbox"/> Resided for 60 days or more <input type="checkbox"/> Driving privileges suspended or revoked
C.	Date held	From _____ To _____
D.	Type of license/permit	_____
E.	Current status	_____
F.	Driving privileges ever revoked/suspended	Yes <input type="checkbox"/> No <input type="checkbox"/> Suspended from _____ To _____

SECTION XII. AUTHORIZATION AND RELEASE

Full Name	
Social Security Number	
Date of Birth	

As part of my application for admission to the bar of the state of Connecticut, I consent to have an investigation made as to my moral character, professional reputation and fitness to practice law. I agree to provide any further information that may be required in reference to my past record. I further agree to execute such further releases as may be requested by the Connecticut Bar Examining Committee. I understand that the contents of my character report are confidential and that I will not be entitled to receive a copy of the report, including but not limited to, character affidavits submitted in support of this application, or to know its contents, unless my file is referred to the Connecticut Bar Examining Committee for character and fitness investigation.

I hereby authorize and request every person, firm, company, corporation, government agency, law enforcement agency, court, association or institution having control of any documents, records, or other information pertaining to me, to furnish to the Connecticut Bar Examining Committee any such information, including documents, records, bar association files regarding charges or complaints filed against me, including any complaints erased by law, whether formal or informal, pending or closed, or any other pertinent data; and to permit the Connecticut Bar Examining Committee or any of its agents or representatives to inspect and make copies of such documents, records, or other information. The records, however, will not include any information with respect to a juvenile offense.

I authorize the National Personnel Records Center in St. Louis, MO or other custodian of my military record to release to the Connecticut Bar Examining Committee information or photocopies from my military personnel and related medical records including a copy of my Report of Separation DD214.

I hereby release, discharge and exonerate the Connecticut Bar Examining Committee, its authorized representatives and any person furnishing information authorized by this release from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records and other information or the investigation made by the Connecticut Bar Examining Committee.

SECTION XIII. ACKNOWLEDGEMENT OF APPLICATION and AUTHORIZATION AND RELEASE

Dated at	City		State		on	
----------	------	--	-------	--	----	--

(Signature of Applicant)

State of	
County of	

On this the _____ day of _____, 20____ before me, _____
(day) (month) (notary public/commissioner of the superior court)

personally appeared _____, known to me (or satisfactorily proven) to be the person
(applicant)
 whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained and that his/her responses are true to the best of his/her knowledge.

In witness whereof I hereunto set my hand.

(notary public/commissioner of the superior court)