Did you:

1. Answer all the questions and review your application for completeness?

2. Attach all the required forms (your individual case may require you to file forms in addition to those listed below):

1) Form 1E (Application)
2) Form 5 (Status Sheet)
3) Form 6 (Checklist)
4) Form 12 (Address labels)
5) Form 14 (Summary sheet in duplicate)
6) Copy of your MBE transfer form?

3. Sign the acknowledgement before a notary public or commissioner of the superior court? Did you do so in BLUE ink?

4. Make sure that all forms printed clearly and completely?

5. Enclose a certified check or money order in the amount of $600.00 payable to: Connecticut Bar Examining Committee? (NOTE: Fee is not refundable or transferable.)

- - - - - - - -

This is a continuing application. You must advise the Bar Examining Committee of any changes to any of the answers on your bar application.

Article IX of the Committee's regulations provides for a one-year time limit to complete your application. After one year, incomplete applications will be deemed to be withdrawn.

NOTE: If you are transferring an MBE score to Connecticut, you must review the instructions for transferring an MBE on our website and submit the correct form and fee to the appropriate entity BEFORE you sit for the bar examination and send a COPY of what you submitted with this application. All transferred scores must be received by the Bar Examining Committee by April 1, 2013. Failure to do so will result in a "0" on the MBE for Connecticut and, consequently, you will fail the Connecticut bar examination.

The filing deadline is Friday, November 30, 2012. Your application must be RECEIVED by that date. Late applications will be returned.

Send your application, required supporting documents and fee to:

Connecticut Bar Examining Committee
February 2013 Application Department
100 Washington Street
Hartford, CT 06106-4411

Form 1E	Official Use Only	Connecticut Bar Examining Committee Application for Admission to Practice As An Attorney in Connecticut By Examination	February 2013 Bar Examination
DF			
File #	213-		

A. Read the rules, regulations and instructions before completing this form.
B. Your answers must be typed and the application signed and notarized.
C. Be sure your name appears at the top of the Authorization and Release.
D. Enclose your certified check or money order for $600.00 payable to "**Connecticut Bar Examining Committee**."

The undersigned applies for admission to practice as an attorney in Connecticut, and in support of such application submits the following sworn statement and attachments. **This application is a continuing application and I will notify the Bar Examining Committee of any changes in any information provided herein**. I have read the Rules and Regulations Governing Admission to the Bar and the Rules of Professional Conduct.

SECTION I. BIOGRAPHICAL INFORMATION

1. Full Name _____
(Last) (First) (Middle)

2. Name as you wish it to appear on your admission certificate:
_____
(Last) (First) (Middle)

3. Place of Birth _____ Date of Birth _____
City/State/Country mm/dd/yyyy

4. Social Security Number ☐☐☐ ☐☐ ☐☐☐☐

[Pursuant to 42 U.S.C. § 666 (a) (13) (A), applicants are advised that providing their Social Security Number is required. The information is requested pursuant to Practice Book § 2-4 and Article III of the Regulations of the Bar Examining Committee. The information will be used to match various records with your file.]

5. Permanent/home address and telephone number (a street address is required; a P.O. box number is not acceptable):

Street					
City					
State		Zip Code		Telephone	

6. Business address and telephone number (a street address is required; a P.O. box number is not acceptable): NA ☐

Business Name					
Street					
City					
State		Zip Code		Telephone	

7. Correspondence address and telephone number:

Street					
City					
State		Zip Code		Telephone	

Yes ☐ No ☐ 8. Have you ever made prior application for admission to the Connecticut bar (by examination or on motion without examination) or filed an application for registration as authorized house counsel or foreign legal consultant? If so, give the month and year of each such application.

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

Name _____		Reason for use	_____
Dates of use	From	To	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. MULTISTATE BAR EXAMINATION

12. **Check only one box.**

☐ I will take the Multistate Bar Examination in Connecticut on February 27, 2013.

I **request permission** to use the score on the Multistate Bar Examination:

* ☐ I have taken in Connecticut on _____

☐ I will take in _____ on February 27, 2013 and have completed the appropriate transfer form (see MBE transfer instruction sheets).

* ☐ I have taken in _____ on _____ and have completed the appropriate transfer form (see MBE transfer instruction sheets).

*** MBE scores prior to July 2011 will not be accepted for transfer.**

*** The election to use a prior score or to sit for the concurrent MBE must be made by February 14, 2013.**

SECTION IV. RESIDENCES

13. List in chronological order every residence, whether permanent or temporary, for more than thirty days, since your eighteenth birthday or for the last ten years, whichever is shorter. Attach Form 13A 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		

From:			To:	
Street				
City				
State		Zip Code		

From:			To:	
Street				
City				
State		Zip Code		

From:			To:	
Street				
City				
State		Zip Code		

SECTION V. REFERENCES

14. List the names and complete addresses of three people 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 #18. You must provide a Form 10 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

SECTION VI. EDUCATION

Yes ☐ No ☐ 15. 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 2.

Yes ☐ No ☐ 16. 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 2.

17. List in chronological order all colleges and universities attended (INCLUDING LAW SCHOOLS). If no degree was received, explain. Each school must submit an official, final transcript **directly** to the Bar Examining Committee (a student copy is NOT acceptable). Each law school must also submit Form 4 **directly** to the Bar Examining Committee **by February 20, 2013** with the official, final transcript and a copy of your application for admission to that law school attached. Attach Form 17A for additional colleges and universities.

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 VII. EMPLOYMENT AND LAW PRACTICE

☐ None

18. Beginning with your sixteenth birthday or for the last ten years, whichever is shorter, list in chronological order the name of each employer. Include any periods of self-employment or unemployment. You must send a Form 11 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 11.** 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 18A 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 ☐ 19. Have you ever been discharged or terminated by an employer? If so, explain on Form 2.

Yes ☐ No ☐ 20. 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 2.

Yes ☐ No ☐ 21. 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 2.

Yes ☐ No ☐ 22. Have you **EVER** filed an application for admission to the bar and/or to sit for the bar examination in a jurisdiction other than Connecticut? This must also include (1) applications which you have filed or intend to file to sit for the February 2013 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. If you check the "Other" box, explain on Form 2.

Jurisdiction		Date Filed		
Type: ☐ Exam	☐ Motion/reciprocity	☐ Law Student Registration	☐ Reinstatement	☐ Other
Current status (e.g.: pending, pass, fail, withdrawn)				

Jurisdiction		Date Filed		
Type: ☐ Exam	☐ Motion/reciprocity	☐ Law Student Registration	☐ Reinstatement	☐ Other
Current status (e.g.: pending, pass, fail, withdrawn)				

Jurisdiction		Date Filed		
Type: ☐ Exam	☐ Motion/reciprocity	☐ Law Student Registration	☐ Reinstatement	☐ Other
Current status (e.g.: pending, pass, fail, withdrawn)				

Yes ☐ No ☐ 23. Are you or have you ever been a member of the bar of another jurisdiction? If so, 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 on Form 2.

Jurisdiction			
Date of admission		License Number:	
Good standing	Yes ☐	No ☐	

Jurisdiction			
Date of admission		License Number:	
Good standing	Yes ☐	No ☐	

Jurisdiction			
Date of admission		License Number:	
Good standing	Yes ☐	No ☐	

Yes ☐ No ☐ NA ☐ 24. (a) Have you ever been reprimanded, suspended, disbarred or otherwise disciplined, or (b) are there any charges or complaints pending against you as an attorney, or (c) have you ever been accused of the unauthorized practice of law, (d) have you ever resigned or been requested to resign from the bar in lieu of impending or anticipated disciplinary action, or (e) have you ever been subject to any discipline or been penalized as a bar applicant in another jurisdiction? If so, explain on Form 2.

Yes ☐ No ☐ NA ☐ 25. Have you been entitled to practice law in each of the jurisdictions specified in Question 23 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. MILITARY SERVICE

Selective Service Registration. You can obtain information on the registration requirements and obtain your registration number at http://www.sss.gov. In brief, men born from March 29, 1957 to December 31, 1959 were never required to register because the registration program was not in operation at the time they turned 18. The requirement to register was reinstated in 1980 and applies to all men born on or after January 1, 1960.

Yes ☐ No ☐ 26. Have you registered under the Selective Service Act?
If Yes, list registration number. _____
If No, state reason. ☐ Female Other _____

Yes ☐ No ☐ 27. Are you or have you ever been a member of the armed forces of the United States (including the National Guard or any reserve component)? If so, submit a Report of Separation DD214 or its equivalent, for each period of active duty and also complete Form 27A and submit it with your bar application.

Branch of service		Highest rank	
Dates From		To	
Type of discharge			

Branch of service		Highest rank	
Dates From		To	
Type of discharge			

SECTION IX. GENERAL QUESTIONS

Yes ☐ No ☐ 28. 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 2 and furnish documentation showing that taxes are current.

Yes ☐ No ☐ 29. 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 2.

Yes ☐ No ☐ 30. 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 which 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 ☐ No ☐	Date	Current status	

Type of license/permit		Name of authority	
Granted Yes ☐ No ☐	Date	Current status	

Yes ☐ No ☐ 31. Have you had any license or permit suspended or revoked because of unprofessional conduct? If so, explain on Form 2.

Yes ☐ No ☐ 32. Have you ever been bonded?

Yes ☐ No ☐ 33. Have you ever been refused a bond or has anyone ever sought to recover on or cancel such bond? If so, explain on Form 2.

NA ☐

Questions 34 – 38 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 34, 37 and/or 38, complete Forms 7 & 8. Make as many copies of the forms as you need to describe the events.

Yes ☐ No ☐ 34. 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 ☐ No ☐ NA ☐ 35. If your answer to Question 34 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?

Yes ☐ No ☐ 36. 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 ☐ No ☐ 37. 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 ☐ No ☐ 38. 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 X. CREDIT
Questions 39 and 40 are limited to the last ten years

Yes ☐ No ☐ 39. Do you have any student loans which are currently overdue or have you ever been in default in the performance of an 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

Creditor _____
Account number _____ Amount _____
Steps to bring current

Creditor _____
Account number _____ Amount _____
Steps to bring current

Yes ☐ No ☐ 40. Has a judgment ever been 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 ☐ No ☐
Forum

Creditor _____
Amount _____ Judgment satisfied Yes ☐ No ☐
Forum

Creditor _____
Amount _____ Judgment satisfied Yes ☐ No ☐
Forum

Creditor _____
Amount _____ Judgment satisfied Yes ☐ No ☐
Forum

Creditor _____
Amount _____ Judgment satisfied Yes ☐ No ☐
Forum

SECTION XI. CIVIL PROCEEDINGS
Questions 41 - 45 are limited to the last ten years

Yes ☐ No ☐ 41. 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 2 an explanation of the steps you have taken to remedy the arrearage or default.

Yes ☐ No ☐ 42. 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 2 outlining the steps you are presently taking to remedy such arrearage or default.

Yes ☐ No ☐ 43. Have you ever filed a grievance against an attorney or a judge? If so, explain on Form 2.

Yes ☐ No ☐ 44. 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.

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	**EXAMPLE**
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		
☐	☐	45.	Except as provided in Questions 40 and 44 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	

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	

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 XII. CRIMINAL AND MOTOR VEHICLE PROCEEDINGS

Yes ☐ No ☐ 46. 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.

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 **EXAMPLE**
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 ☐ 47. 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.

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 **EXAMPLE**
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	

Yes ☐ No ☐ 48. 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 2, submit a narrative of the events related to each charge.

A.	Jurisdiction	Connecticut
B.	Date of charge	01 Jan 02
C.	Docket number (if any)	n/a **EXAMPLE**
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	

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

None ☐

49. List every jurisdiction and submit a **certified** driving record (or "no record" or "clearance" letter) from the Department of Motor Vehicles for 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 2, provide a narrative for each suspension or revocation.

EXAMPLE

A.	Jurisdiction	Connecticut
B.	X License or permit held	☐Resided for 60 days or more X 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 x No ☐ Suspended from 9/1/01 To 12/1/01

A.	Jurisdiction	
B.	☐ License or permit held	☐ Resided for 60 days or more ☐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 ☐ No ☐ Suspended from To

A.	Jurisdiction	
B.	☐ License or permit held	☐ Resided for 60 days or more ☐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 ☐ No ☐ Suspended from To

A.	Jurisdiction			
B.	☐ License or permit held	☐ Resided for 60 days or more		☐ 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 ☐ No ☐	Suspended from	To

A.	Jurisdiction			
B.	☐ License or permit held	☐ Resided for 60 days or more		☐ 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 ☐ No ☐	Suspended from	To

A.	Jurisdiction			
B.	☐ License or permit held	☐ Resided for 60 days or more		☐ 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 ☐ No ☐	Suspended from	To

A.	Jurisdiction			
B.	☐ License or permit held	☐ Resided for 60 days or more		☐ 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 ☐ No ☐	Suspended from	To

A.	Jurisdiction			
B.	☐ License or permit held	☐ Resided for 60 days or more		☐ 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 ☐ No ☐	Suspended from	To

A.	Jurisdiction			
B.	☐ License or permit held	☐ Resided for 60 days or more		☐ 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 ☐ No ☐	Suspended from	To

SECTION XIII. SPECIMEN OF APPLICANT'S HANDWRITING

50. Each applicant shall file with the application for admission a copy of the following paragraph in the usual handwriting of the applicant. Copy the paragraph below in your usual handwriting in the space below. It should not be printed unless that is your usual form of handwriting. **Please use BLUE ink**.

I hereby acknowledge that this application for admission to the Connecticut bar is a continuing application and that I have an obligation to keep my responses to the questions current, complete and correct by filing timely amendments until the date of my admission to the bar of Connecticut. I understand that an amendment is considered timely when made within thirty days of any occurrence that would change or render incomplete any answer on my bar application. I further understand that any false, misleading or evasive response on my bar application is inconsistent with the truthfulness and candor required of a practicing attorney and may be grounds for a finding of a lack of the requisite good moral character and fitness for membership in the Connecticut bar. I certify that my purpose for taking the Connecticut Bar Examination is for admission purposes only.

SECTION XIV. 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 also authorize the release to my law school(s) and the National Conference of Bar Examiners my name and summary data, which shall include but not be limited to social security number, date of birth and pass/fail data, regarding my performance on the Connecticut Bar Exam.

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.

I hereby authorize the Connecticut Bar Examining Committee to release my name and email address to a third party software vendor for the sole purpose of facilitating the registration of my laptop computer for use on the essay portion of the Connecticut bar examination.

I further hereby authorize the Connecticut Bar Examining Committee to release my name and correspondence address to bar associations for the purposes of membership solicitation, educational opportunities and the like. **IF YOU WISH TO OPT OUT OF THE RELEASE OF SUCH INFORMATION, THEN PLEASE USE THE CHECK BOX PROVIDED BELOW.**

☐ I hereby **DO NOT** authorize the Connecticut Bar Examining Committee to release my name and correspondence address to bar associations for the purposes of membership solicitation, educational opportunities and the like.

SECTION XV. ACKNOWLEDGMENT OF APPLICATION and AUTHORIZATION AND RELEASE
Please use BLUE ink.

Dated at	City		State		on	

_____
(Signature of Applicant)

Email address: _____

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, under penalty of making a false statement pursuant to General Statutes § 53a-157b (a Class A misdemeanor).

In witness whereof I hereunto set my hand.

_____
(notary public/commissioner of the superior court)