

Form M15

**AFFIDAVIT OF THE DEAN OF AN ACCREDITED CONNECTICUT
LAW SCHOOL AT WHICH THE APPLICANT IS A FULL-TIME
FACULTY MEMBER OR FULL-TIME CLINICAL FELLOW**

***The law school must send this form directly to the administrative
office of the Bar Examining Committee***

IN RE THE APPLICATION OF _____
FOR APPLICATION FOR ADMISSION WITHOUT EXAMINATION

Affiant's Name: _____

Affiant's address and telephone number:

Law School: _____

Street: _____

City: _____ State: _____ Zip Code: _____

Telephone #: _____

I, _____, on behalf of
_____ (hereinafter "law school"), certify that
the above named applicant for admission without examination is a full-time faculty
member or full-time clinical fellow at the law school. I further certify that the applicant
has been a full-time faculty member or full-time clinical fellow with the law school since
_____.

(Signature of Dean of the Law School)

(Print Name of Dean of the Law School)

Sworn to before me this

_____ day of _____,

20____.

(Notary Public)