

**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)**
- 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 \$800.00 payable to: Connecticut Bar Examining Committee? (NOTE: Fee is not refundable or transferable.)**

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**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 After one year, incomplete applications will be deemed to be withdrawn.**

**The Connecticut Bar Examining Committee (CBEC) will conduct an extensive background check for all applicants and reserves the right to require applicants to submit fingerprints.**

**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(s) and fee to the appropriate entity BEFORE you sit for the bar examination. All transferred scores must be received by the Bar Examining Committee by April 2, 2018. Failure to do so will result in a "o" on the MBE for Connecticut and, consequently, you will fail the Connecticut bar examination.**

**The filing deadline is Thursday, November 30, 2017. 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 2018 Application Department  
100 Washington Street, 1<sup>st</sup> Floor  
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 2018 Bar Examination
DF			
File #	<b>218-</b>		

- 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 \$800.00 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
- 4a. Social Security Number 

--	--	--	--	--	--	--	--	--	--
- 4b. NCBE Number 

<b>N</b>									
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[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, by transfer of UBE score, 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.
- 


9. List all names you have been known by, **including** those listed in Questions 1 & 2, and provide the dates and places of use for each. Do not list nicknames such as "Bob" for "Robert."

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 both sides 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 28, 2018.

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

- \*  I will take in \_\_\_\_\_ on February 28, 2018, and have completed the appropriate transfer form (see MBE transfer instruction sheets).
- \*  I have taken in \_\_\_\_\_ on \_\_\_\_\_, was successful on each examination for which the score was originally achieved, and have completed the appropriate transfer form (see MBE transfer instruction sheets).

**\* In order to obtain a UBE score, an applicant must sit for the MPT, the MEE, and the MBE in Connecticut during the same administration of the exam.**

**\* MBE scores prior to July 2016 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 15, 2018. An applicant who elects to transfer an MBE score from a concurrent or prior administration of the exam will not obtain a UBE score.**

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, dropped, suspended, warned, placed on scholastic or disciplinary 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 21, 2018**, 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. Applicants with a foreign law degree approved under Art. II-3 of the CBEC regulations must have the LL.M. degree granting law school submit the official, final transcript **directly** to the Bar Examining Committee, along with copies of official course descriptions for all courses taken, by **February 1, 2018**.

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

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.

None

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 2018 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: <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)	

- Yes  No  23. Are you or have you ever been a member of the bar of another jurisdiction, or admitted to any federal court? If so, submit a certificate of good standing for each. 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 Filed _____
Date of admission _____	License Number: _____
Good standing Yes <input type="checkbox"/> No <input type="checkbox"/>	

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

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

- Yes  No  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.
- NA

- Yes  No  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.
- NA

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 <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  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

Yes    No    34.    Within the past five years, have you engaged in any conduct that: (1) resulted in an arrest, discipline, sanction or warning; (2) resulted in termination or suspension from school or employment; (3) resulted in loss or suspension of any license; (4) resulted in any inquiry, any investigation, or any administrative or judicial proceeding by an educational institution, government agency, professional organization, or licensing authority, or in connection with an employment disciplinary or termination procedure; or (5) endangered the safety of others, breached fiduciary obligations, or constituted a violation of workplace or academic conduct rules? If so, explain on Form 2 and include any asserted defense or claim in mitigation or as an explanation of your conduct and, if applicable to your explanation, Form 8.

  

Yes    No    35.    Within the past five years, have you exhibited any conduct or behavior that could call into question your ability to practice law in a competent, ethical, and professional manner? If so, explain on Form 2.

  

Questions 36 – 37 address 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 that indicates that the applicant is currently unfit to practice law at the time the licensing decision is made, or when the applicant demonstrates a lack of candor and/or credibility by his or her response. 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 Question 36, complete Forms 7 and 8. Make as many copies of the forms as you need to describe the events.

Yes    No    36.    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) that in a material way affects your ability to practice law in a competent, ethical, and professional manner? “Currently” means recently enough that the condition or impairment could reasonably affect your ability to function as a lawyer. If your answer is yes, continue to Question 37 and complete Forms 7 and 8. If your answer is no, continue to Question 38.

  

Yes    No    37.    If your answer to Question 36 is yes, are the limitations caused by your condition or impairment reduced or ameliorated because you receive ongoing treatment or because you participate in a monitoring or support program?

**SECTION X. CREDIT**  
Questions 38 and 39 are limited to the last ten years

Yes  No  38. 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  39. 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 <input type="checkbox"/> No <input type="checkbox"/>
Forum _____

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 _____

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 XI. CIVIL PROCEEDINGS  
Questions 40 - 44 are limited to the last ten years

- Yes  No  40. 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  41. 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  42. Have you ever filed a grievance against an attorney or a judge? If so, explain on Form 2.
- Yes  No  43. 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 <b>EXAMPLE</b>
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    44.    Except as provided in Questions 39 and 43 above, have you ever been a party to any civil or administrative proceeding or has any civil or administrative 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, any other civil and administrative proceeding, or any proceeding before a government agency, professional organization, licensing authority, the Law School Admission Council (LSAC), the National Collegiate Athletic Association (NCAA) or similar entity, or through online dispute resolution?

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

**The Connecticut Bar Examining Committee (CBEC) will conduct an extensive background check for all applicants and reserves the right to require applicants to submit fingerprints.**

Yes  No  45. 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. If you are uncertain as to whether a matter ought to be disclosed in accordance with this question, we advise you to disclose the matter fully.

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 <b>EXAMPLE</b>
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)	_____

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  46. 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 <b>EXAMPLE</b>
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  47. 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 <b>EXAMPLE</b>
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	_____

48. 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.	<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 _____



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 _____

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 _____

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 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 written portion of the Connecticut bar examination.

I hereby transfer copyright and assign to the Connecticut Bar Examining Committee all rights, title and interest that I may have in the bar examination written answers. I give permission to the Connecticut Bar Examining Committee to publish my answers, with my identity redacted, in a Sample Answer study guide.

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)