

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 - in duplicate)**
 - 5) Form M7 (Return address labels)**
 - 6) Form M10 A (List of personal references)**
 - 7) Form M11A (List of employers)**
 - 8) Form M15 (Certificate of actual practice and/or clinical supervision)**
 - 9) Form M17 (Status sheet)**

Note: Forms M8 (affidavit of Connecticut attorney), M9 (affidavit of attorney), M10 (personal references) and M11 (employer references) should be sent directly to the CBEC by the affiants. If applicable, Forms M18 (affidavit of CT law school Dean) and M19 (affidavit(s) from other law school Dean(s)) should be sent directly to the CBEC by the affiants. Form M12 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

Form M1	Official Use Only	Connecticut Bar Examining Committee Application for Admission to Practice As An Attorney in Connecticut	Admission Without Examination
DF			
App #			

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. Pay the \$1,800.00 fee by certified check or money order 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:
 Full Name _____

(Last)
(First)
(Middle)
3. Place of Birth _____ Date of Birth _____

City/State/Country
mm/dd/yyyy
4. Social Security Number

[Pursuant to 42 USC §666(a)(13)(A) applicants are advised that providing their Social Security Number is required. The information is requested pursuant to Practice Book Sec. 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):

Business Name				
Street				
City				
State	Zip Code	Telephone		

7. Correspondence address and telephone number (if temporary, supply effective dates): From _____ To _____

Street				
City				
State	Zip Code	Telephone		

8. Have you ever made prior application for admission to the Connecticut bar (by examination or on motion without examination)? If so, give the dates of each such application.

<input type="checkbox"/> Yes	<input type="checkbox"/> No				

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. Using Form M10A , list the names and complete addresses (including zip codes) of three persons unrelated to each other, with whom you are personally acquainted and who are not related to you by blood or marriage.
13. Using Form M11A, beginning with your 16th birthday or for the last ten years, whichever is shorter, list in chronological order the name of each employer, complete current address (including zip code), position held, nature of the business, your immediate supervisor, and your reasons for leaving. Include any periods of self-employment and account for any periods of unemployment.

Form M1

14. List the names 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 M8) that will certify facts relating to your character.

15. 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 your are admitted, who have been admitted in such reciprocal jurisdiction(s) for at least five years and will supply affidavits (Forms M9) that will certify facts relating to your character.

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 M18) that will certify facts relating to your employment relationship and term. Please note: Form M18 must be supplied in addition to Form M11.

NA

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 M19) that will certify facts relating to your employment relationship and term. Please note: Form M19 must be supplied in addition to Form M11.

NA

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		

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.

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.

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 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 M12 directly to the Bar Examining Committee with the official, final transcript 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: _____	

SECTION VI. EMPLOYMENT AND LAW PRACTICE

Yes No 22. Have you ever been discharged or terminated by an employer? If so, explain.

Yes No 23. Have you ever resigned or been requested to resign in lieu of impending or anticipated disciplinary action by an employer? If so, explain.

Yes No 24. Have you ever been absent from a job for more than ten consecutive work days, other than regularly scheduled vacations? If so, explain.

Form M1

Yes No 25. 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 an upcoming bar examination, (2) registration as a law student, (3) an application for reinstatement and (4) any application subsequently withdrawn. 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)	

Yes No 26. 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. If you are not in good standing, explain.

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

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

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

Yes No 27. 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.

NA

Yes No 28. Have you been entitled to practice law in each of the jurisdictions specified in Question 26 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 _____			

29. State the exact names and locations of courts before which your practice of law for the last ten years was chiefly conducted and the general nature of cases tried, if any, or the law schools (name and location) at which you currently supervise or have supervised law students in a clinical program as a member of the faculty for the last ten years.
30. Describe in detail the nature of your practice and the extent of same or the title(s) of the clinical program(s) and term(s) for which you currently supervise or have supervised law students in a clinical program as a member of a law school listed above.

SECTION VII. 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 31. Have you registered under the Selective Service Act?
 If Yes, list registration number _____
 If No, state reason Female Other _____
- Yes No 32. 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. Also complete Form M16 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 _____			

Branch of service	_____	Highest rank	_____
Dates From	_____	To	_____
Type of discharge _____			

SECTION VIII. GENERAL QUESTIONS

Yes No 33. 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 below and furnish documentation showing that taxes are current.

Yes No 34. 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.

Yes No 35. 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 36. Have you had any license or permit suspended or revoked because of unprofessional conduct? If so, explain.

Yes No 37. Have you ever been bonded?

Yes No 38. If so, have you ever been refused a bond or has anyone ever sought to recover on or cancel such bond? If so, Explain.

NA

Questions 39 – 43 address recent mental health and chemical or psychological dependency matters. The purpose of these questions is to determine the current fitness of an applicant to practice law. 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. 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 39, 40 and/or 41, complete Forms M13 & M14. Make as many copies of the forms as you need to describe the events.

- | | | | |
|---------------------------------|--------------------------------|-----|--|
| Yes
<input type="checkbox"/> | No
<input type="checkbox"/> | 39. | Since you graduated from college or for the past five years, whichever is shorter, have you been hospitalized for treatment of a mental, emotional or nervous disorder or condition? |
| Yes
<input type="checkbox"/> | No
<input type="checkbox"/> | 40. | During the last five years, have you been 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. |
| Yes
<input type="checkbox"/> | No
<input type="checkbox"/> | 41. | 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 any 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"/> | 42. | If your answer to Question 41 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"/> | 43. | 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. |

SECTION IX. CREDIT

Questions 44 and 45 are limited to the last ten years

- Yes No 44. 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 45. 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 46 - 50 are limited to the last ten years

- Yes No 46. 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 47. 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 48. Have you ever filed a grievance against an attorney or a judge? If so, explain.

Form M1

Yes No 49. 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 50. Except as provided in Questions 45 and 49 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 51. 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 52. 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 53. 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 54. 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 or have ever held a motor vehicle driver's license or operator's permit;
2. Any jurisdiction in which you have resided for sixty days or more;
3. Any jurisdiction in which your driving privileges have ever been suspended or revoked.

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. 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 1/1/2002 To 3/1/2002

A. Jurisdiction	_____
B. Date held	From _____ To _____
C. Type of license/ permit	_____
D. Current status	_____
E. Ever revoked/ suspended	Yes <input type="checkbox"/> No <input type="checkbox"/> Suspended from _____ To _____

A. Jurisdiction	_____
B. Date held	From _____ To _____
C. Type of license/ permit	_____
D. Current status	_____
E. Ever revoked/ suspended	Yes <input type="checkbox"/> No <input type="checkbox"/> Suspended from _____ To _____

A. Jurisdiction	_____
B. Date held	From _____ To _____
C. Type of license/ permit	_____
D. Current status	_____
E. 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.

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)