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?

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

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

.

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 After one year, incomplete applications will be deemed to be withdrawn.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 August 31, 2011. Failure to do so will result in a "0" on the MBE for Connecticut and, consequently, you will fail the Connecticut bar examination.

<u>The filing deadline is Monday, May 2, 2011</u>. 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 July 2011 Application Department 100 Washington Street Hartford, CT 06106-4411

| Form 1 | Official Use Only | | | | | |
|------------------------------|--|---|---------------------|--|--|--|
| | | Connecticut Bar Examining Committee | | | | |
| DF | | Application for Admission to Practice | July 2011 | | | |
| 711 | | As An Attorney in Connecticut | Bar Examination | | | |
| File # / 1 1- By Examination | | | | | | |
| A. F | A. Read the rules, regulations and instructions before completing this form. | | | | | |
| В. Ү | Your answers must be typed and the application signed and notarized. | | | | | |
| C. B | Be sure your name appears at the top of the Authorization and Release. | | | | | |
| D. E | Enclose your certified check o | r money order for \$600.00 payable to " Connecticut Bar Ex a | amining 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 app | ear on your admission certificate: | | |
| | | | | |
| | | (Last) | (First) | (Middle) |
| 3. | Place of Birth | | Date of Birth | |
| | | City/ State/ Country | | mm/dd/yyyy |
| 4. | Social Security Number | | | |
| | - | 66 (a) (13) (A), applicants are advised ursuant to Practice Book δ 2-4 and Ar | 1 0 | 5 |

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):

| Busines | s Name | | | |
|---------|--------|----------|-----------|--|
| Street | | | | |
| City | | | | |
| State | | Zip Code | Telephone | |

7. Correspondence address and telephone number.

| Street | | | | |
|--------|----|----|----------|---|
| City | | | | |
| State | | Z | Zip Code | Telephone |
| Yes | No | 8. | • | ever made prior application for admission to the Connecticut bar (by examination or on motion xamination)? 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 | То | Places of use | |
| | | | | |
| Name | | Reason for use | | |
| Dates of use | From | То | Places of use | |
| | | | | |
| Name | | Reason for use | | |
| Dates of use | From | То | Places of use | |
| Name | | Reason for use | | |
| Dates of use | From | То | Places of use | |
| | | | | |
| Name | | Reason for use | | |
| Dates of use | From | То | Places of use | |

Yes 10. Check the appropriate box below:

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 July 27, 2011.

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

- * I have taken in Connecticut on
 - I will take in _____ on July 27, 2011 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 February 2010 will not be accepted for transfer.

* The election to use a prior score or to sit for the concurrent MBE must be made <u>by</u> <u>July 14, 2011</u>.

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 | | | |
| | · · · | | | |
| | | | | 1 |
| From: | | To: | | |
| Street | | | | |
| City | | | | |
| State | Zip Code | | | |
| D array | | Π | | 1 |
| From: | | To: | | |
| Street | | | | |
| City | Zin Cala | | | |
| State | Zip Code | | | |
| From: | | To: | |] |
| Street | | 10. | | |
| City | | | | |
| State | Zip Code | | | |
| ~~~~~ | | | | |
| From: | | To: | | |
| Street | | | | |
| City | | | | |
| State | Zip Code | | | |
| | | | | |
| From: | | To: | | |
| Street | | | | |
| City | | | | |
| State | Zip Code | | | |
| En a marci | | | | 1 |
| From: | | To: | | |
| Street | | | | |
| City | Zip Code | | | |
| State | Zip Coue | | | |
| From: | | To: | | |
| Street | | 10. | 1 | 1 |
| City | | | | |
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| | r | | | |
| 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

No 15. Have you ever been expelled, suspended, placed on probation or been the subject of or party to any Yes disciplinary proceeding by any college, university or law school? If so, explain on Form 2.

- Have you ever been absent from any post-secondary educational institution for more than ten consecutive No 16. Yes 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 July 20, 2011 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 T | 0 |
| Explanation for no degree: | | |
| | | |
| School | | Degree |
| City | | State |
| Zip Code | From T | 0 |
| Explanation for no degree: | | |
| | | |
| School | | Degree |
| City | | State |
| Zip Code | From T | 0 |
| Explanation for no degree: | | |
| | | |
| School | | Degree |
| City | | State |
| Zip Code | From T | 0 |
| Explanation for no degree: | | |
| | | |
| School | | Degree |
| City | | State |
| Zip Code | From T | 0 |
| Explanation for no degree: | | |
| | | |
| School | | Degree |
| City | | State |
| Zip Code | From T | 0 |
| Explanation for no degree: | | |
| School | | Degree |
| City | | State |
| Zip Code | From T | 0 |
| 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

| Name | P | |
|--|--------------------|------------------|
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| Reason for leaving To From To Name Street City State Zip Code Position held Type Supervisor Type of business Reason for leaving To Street To City To Street To City State Zip Code Street City State Zip Code Position held Type State Zip Code Street To Type State Zip Code Street Type of business Type State Zip Code Position held Type of business Type State Zip Code Reason for leaving Type of business Type State Type | | |
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| City State Zip Code Position held Type Supervisor Type of business Reason for leaving To From Name To Street City City State Position held Type State Zip Code Position held Type Supervisor Type of business Reason for leaving Type of business | | |
| Position held Type Supervisor Type of business Reason for leaving To From From To From Name To Street City State Zip Code Position held Position held Type of business | | |
| Supervisor Type of business Reason for leaving To From To Name To Street City City State Position held Type Supervisor Type of business Reason for leaving Type of business | 5 | Zip Code |
| Reason for leaving From To Name Street City State Zip Code Position held Supervisor Reason for leaving Type of business | | Туре |
| From To Name To Street City City State Zip Code Position held Supervisor Supervisor Reason for leaving | Supervisor | Type of business |
| Name Street Street State City State Position held Type Supervisor Type of business Reason for leaving Type of business | Reason for leaving | |
| Name Street Street State City State Position held Type Supervisor Type of business Reason for leaving Type of business | | |
| Street City State Zip Code Position held Type Supervisor Type of business Reason for leaving Type | From | То |
| City State Zip Code Position held Type Supervisor Type of business Reason for leaving Type of business | Name | |
| Position held Type Supervisor Type of business Reason for leaving Type of business | Street | |
| Supervisor Type of business Reason for leaving Type of business | City State | Zip Code |
| Supervisor Type of business Reason for leaving | Position held | Туре |
| | Supervisor | Type of business |
| | Reason for leaving | |
| | | |
| From To | From | То |
| Name | | |
| Street | Street | |
| City State Zip Code | | Zip Code |
| Position held Type | | - |
| Supervisor Type of business | | |
| | Reason for leaving | |

| Yes | No | |
|-----|----|--|
| Vas | 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 July 2011 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. If you check the "Other" box, explain on Form 2.

| Jurisdi | iction | | Date Filed | | | |
|---------|--------------------|--------------------------------|--------------------------|---------------|-------|--|
| Type: | 🗌 Exam | Motion/reciprocity | Law Student Registration | Reinstatement | Other | |
| Curren | it status (e.g.: j | pending, pass, fail, withdrawr | 1) | | | |

| Jurisdic | ction | | Date Filed | | | |
|----------|---------------|--------------------------------|--------------------------|---------------|-------|--|
| Type: | 🗌 Exam | Motion/reciprocity | Law Student Registration | Reinstatement | Other | |
| Current | status (e.g.: | pending, pass, fail, withdrawr | n) | | | |
| | | | | | | |
| Inriedic | otion | | Data Filad | | | |

| Jurisdic | | | 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 🗌 | | | | | |
| L | | | | | |
| Jurisdiction | | | | | |
| Date of admission | License Number: | | | | |
| Good standing Yes 🗌 No 🗌 | | | | | |
| Charges or complaints pending unauthorized practice of law, (d impending or anticipated discip | anded, suspended, disbarred or otherwise disciplined, or (b) are there any g against you as an attorney, or (c) have you ever been accused of the l) have you ever resigned or been requested to resign from the bar in lieu of plinary action, or (e) have you even been subject to any discipline or been nother jurisdiction? If so, explain on Form 2. | | | | |
| each court continuously from th during which you have not been | ice law in each of the jurisdictions specified in Question 23 above and before the date you first became entitled until the date hereof? If not, state the dates so entitled, the nature of the disqualification, and the name and address of the | | | | |
| NA person or authority in possession | n of the record thereof. | | | | |
| Jurisdiction Dates of disqual Nature of disqualification | lification From To | | | | |
| 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 ur If Yes, list registration | | ive Service Act? |
|-----|---------|-----|---|--------|------------------|
| | | | 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 Dates From | Highest rank | То |
|---------------------------------|--------------|----|
| Type of discharge | | |
| | | |
| Branch of service | Highest rank | |
| Dates From | | То |
| 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.

| Туре | of licer | nse/pei | mit Name of authority |
|------|----------|---------|--|
| Gran | ted | Yes | No Date Current status |
| | | | |
| Туре | of lice | nse/pei | mit Name of authority |
| Gran | ted | 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 □ | 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 |
| NA | | | 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 |

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 |
| Image: answer, judgment and satisfaction of judgment. Creditor Amount Judgment satisfied Yes No |
| Creditor |
| Image: Creditor Amount Forum Judgment satisfied Yes No |
| Image: answer, judgment and satisfaction of judgment. Creditor Amount Forum Image: Creditor Creditor Image: Creditor Image: Creditor Image: Creditor Image: Creditor |
| Image: answer, judgment and satisfaction of judgment. Creditor Amount Judgment satisfied Forum Creditor Amount Judgment satisfied Yes No Creditor Amount Judgment satisfied Yes No |
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| Image: Creditor Amount Forum Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Image: Creditor Amount Forum Creditor Amount Forum Image: Creditor Creditor Creditor Image: Creditor Creditor Creditor Image: Creditor Creditor Creditor |
| Creditor Amount Forum Creditor Amount Judgment satisfied Yes No Creditor Amount Judgment satisfied Yes No Creditor Amount Judgment satisfied Yes No Creditor Judgment satisfied Yes No |
| Image: Creditor Amount Forum Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Image: Creditor Amount Forum Image: Creditor Creditor Creditor Image: Creditor Creditor |
| answer, judgment and satisfaction of judgment. Creditor Amount Forum Creditor Amount Judgment satisfied Yes No |
| Image: answer, judgment and satisfaction of judgment. Creditor Amount Forum Creditor Amount Judgment satisfied Yes No Creditor Creditor Creditor |
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| Image: answer, judgment and satisfaction of judgment. Creditor Amount Forum Creditor Amount Judgment satisfied Yes No Creditor Creditor Creditor |
| Creditor Amount Forum Creditor Amount Judgment satisfied Yes No |
| Image: Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Judgment satisfied Yes No Creditor Amount Forum Judgment satisfied Yes No |
| Creditor Amount Forum Creditor Amount Judgment satisfied Yes No |

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 | |
|----|-------------------------------|-------------------------|---------|
| В. | 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 | |
| Н. | Opposing attorney | Elizabeth Green | |
| I. | Current status or disposition | Verdict for plaintiff | |

PHOTOCOPY AS NECESSARY

| A. | Title of case | |
|----|-------------------------------|--|
| В. | Name of forum | |
| C. | Docket number | |
| D. | Date filed | |
| E. | Nature of case | |
| F. | Your position in case | |
| G. | Your attorney | |
| Н. | 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 | |
| Η. | 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?

| ٨ | Title of case |
|----------|-------------------------------|
| A. | |
| B. | Name of forum |
| C. | Docket number |
| D. | Date filed |
| E. | Nature of case |
| F. | Your position in case |
| G. | Your attorney |
| Η. | Opposing attorney |
| Ι. | Current status or disposition |
| J | |
| А. | Title of case |
| B. | Name of forum |
| С. | Docket number |
| D. | Date filed |
| E. | Nature of case |
| E. F. | |
| | Your position in case |
| G. | Your attorney |
| Н. | Opposing attorney |
| I. | Current status or disposition |
| I | |
| A. | Title of case |
| В. | Name of forum |
| C. | Docket number |
| D. | Date filed |
| E. | Nature of case |
| F. | Your position in case |
| G. | Your attorney |
| Н. | Opposing attorney |
| I. | Current status or disposition |
| <u> </u> | 1 |
| A. | Title of case |
| B. | Name of forum |
| С. | Docket number |
| С. D. | Date filed |
| D. Е. | Nature of case |
| E. F. | |
| | Your position in case |
| G. | Your attorney |
| Н. | Opposing attorney |
| I. | Current status or disposition |
| n | |
| A. | Title of case |
| В. | Name of forum |
| C. | Docket number |
| D. | Date filed |
| E. | Nature of case |
| F. | Your position in case |
| G. | Your attorney |
| Н. | Opposing attorney |
| I. | Current status or disposition |
| <u> </u> | |

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 | | | | | |
|----|--------------------------------|-------------------------|--|--|--|--|--|
| В. | 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 | |
|----|--------------------------------|--|
| В. | 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 | | | | |
|----|-----------------|-------------------------|--|--|--|--|
| В. | 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 | |
|----|-----------------|--|
| В. | 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 | |
|----|-------------------------------|------------------|---------|
| В. | Date of charge | 01 Jan 02 | |
| C. | Docket number (if any) | n/a | EXAMPLE |
| D. | Initial charge | DWI | |
| Е. | Current status or disposition | reckless driving | |
| | | | |
| А. | Jurisdiction | | |
| В. | 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 | |
|----|-------------------------------|--|
| В. | 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 <u>no later than sixty (60) days</u> 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 Jurisdiction Connecticut A. В. Resided for 60 days or more X Driving privileges suspended or revoked X License or permit held Β. 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 х No Suspended from 9/1/01 То 12/1/01

| А. В. | Jurisdiction | Resided for 60 days or more Driving privileges suspended or revoked | | | | | |
|----------|--|---|--|----|--|----------------|----|
| C. | Date held | From | | | | То | |
| D. | Type of license/permit | | | | | | |
| E. | Current status | | | | | | |
| F. | Driving privileges ever revoked/suspended | Yes | | No | | Suspended from | То |

| A. B. | Jurisdiction | Resided for 60 days or more | | | for 60 | days or more | Driving privileges suspended or revoked |
|----------|---|-----------------------------|--|----|--------|----------------|---|
| C. | Date held | From | | | | То | |
| D. | Type of license/permit | | | | | | |
| E. | Current status | | | | | | |
| F. | Driving privileges ever revoked/ suspended | Yes | | No | | Suspended from | То |

Form 1E JULY 11

| A. B. C. D. E. | Jurisdiction License or permit held Date held Type of license/permit Current status Driving grinilages even | Resided for 60 days or more From To | Driving privileges suspended or revoked |
|----------------------------|--|---|---|
| F. | Driving privileges ever revoked/suspended | Yes No Suspended from | То |
| | | | |
| А. В. | Jurisdiction | Resided for 60 days or more | Driving privileges suspended or revoked |
| C. | Date held | From To | |
| D. | Type of license/permit | | |
| Е. F. | Current status Driving privileges ever | | |
| 1. | revoked/suspended | Yes No Suspended from | То |
| | | | |
| A. | Jurisdiction | | |
| B. | License or permit held Date held | Resided for 60 days or more From To | Driving privileges suspended or revoked |
| C. D. | Type of license/permit | | |
| Е. | Current status | | |
| F. | Driving privileges ever revoked/suspended | Yes No Suspended from | То |
| | Teroked, suspended | | |
| 1 | | | |
| А. В. | Jurisdiction | Resided for 60 days or more | Driving privileges suspended or revoked |
| Б. С. | Date held | From To | |
| D. | Type of license/permit | | |
| E. | Current status | | |
| F. | Driving privileges ever revoked/suspended | Yes 🔲 No 🗌 Suspended from | То |
| | | | |
| A. | Jurisdiction | | |
| B. | License or permit held Date held | Resided for 60 days or more From To | Driving privileges suspended or revoked |
| C. D. | Type of license/permit | | |
| E. | Current status | | |
| F. | Driving privileges ever revoked/suspended | Yes 🔲 No 🗌 Suspended from | То |
| | ierokeu/suspendeu | | |
| | | | |
| А. В. | Jurisdiction | Resided for 60 days or more | Driving privileges suspended or revoked |
| Б. С. | Date held | From To | |
| D. | Type of license/permit | | |
| E. | Current status | | |
| F. | Driving privileges ever revoked/suspended | Yes No Suspended from | То |
| | | | |

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.

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 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.

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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.

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

| Dated at | City | | State | | on | |
|--------------|---------|-------------|---------|-------|---------|---|
| | | | | | | |
| | | | | | | |
| | | | | | (Signat | ure of Applicant) |
| Email addre | ss: | | | | | |
| | | | | | | |
| State of | | | | | | |
| | | | | | | |
| County of | | | | | | |
| On this the | | day of | | 20 | he | fore me, |
| On this the | | | (month) | , 20_ | 00 | (notary public/ commissioner of the superior court) |
| personally a | appeare | d | | | _, kno | own 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)