ALABAMA STATE BAR ADMISSIONS OFFICE PAPER ITEMS PACKET INSTRUCTIONS LAW STUDENT REGISTRATION APPLICATION

The items in this packet must be printed in hard copy, completed (including notarization where applicable) and returned to the Admissions Office before processing will begin on your electronic application. Once these items have been received, you will receive confirmation and we will begin processing your application.

The items listed below are included in this packet and should be returned to the Admissions Office at the address below.

- Acknowledgment of Complete Application
- Alabama Authorization & Release
- Dean's Certification to be completed by law school dean or other certifying official

The completed items must be returned in hard copy format to the following address:

Alabama State Bar Attn: Admissions P.O. Box 671 Montgomery, AL 36101

For more information, you may contact the Admissions Office at (334) 269-1515.

ACKNOWLEDGMENT OF COMPLETE APPLICATION

I have submitted an application to the Alabama State Bar, through its online application portal and, in said application, I have answered all questions completely and fully in all respects without mental reservation or purpose of evasion. I am aware that the application is continuing in nature and that I should update my application, if necessary. I have not modified the questions in any respect, and I understand that should they be modified, work on my application may be terminated. I understand that I should update my application during its pendency and that failure to do so may result in delays in its processing.

Signature of Applicant		Date	Date		
STATE/DISTRICT OF					
COUNTY/PARISH OF					
Subscribed and sworn to or affirme	ed before me this _		day		
of		, 20			
Signature of Notary Public					
My commission expires					
Seal or stamp must be affixed to ea	ach original.				

ALABAMA AUTHORIZATION AND RELEASE

TO WHOM IT MAY CONCERN:

Name of Registrant or Applicant

I,							
	Applic	ant Name					
Having filed an application with the Alabama Board of the Bar of this State lodged with the Alabama Board of of Alabama to determine that only those of high charac medical doctor, school official, and every other person any documents, records or other information pretaining of an attorney, to furnish the originals or copies of any records and other information including but not limited may have been made or prepared pursuant to, or in co tests, evaluation or evaluations of the undersigned. I hereby authorize all such persons as set out above to may be submitted to them by the Alabama Board of E authorized representative, and to give full and comple undersigned. I hereby relinquish any and all rights to or any other incident in any way to cooperation with understand that I shall not be entitled to have disclosed I hereby authorize the Alabama Board of Bar Examin future release of bar exam scores, statistics and other re I hereby release and exonerate every medical doctor organization or institution which shall comply in good nature and kind growing out of or in anywise pertainin the investigation made by said Alabama Board of Bar relevant to his/her good moral character and fitness to and such other regulations as may be promulgated gove	F Bar Examine: ter and ability n, firm, officer g to me relevar such documen d to any and al nnection with, answer any in tar Examiners te testimony c said reports, in h the Alabama ports on perfor r, school offi faith with the a g to the furnis Examiners. TI perform the re:	rs by the Sup are admitted r, corporation at to my good tts, records ar l medical rep any examina nquiries, que or its authori oncerning the ncluding but a Board of F ents of any o horized repre rmance which icial, and ev authorization hing or inspen- be undersigne sponsibilities	reme Court of Alabar to the Bar of Alabar , association, organ moral character and d other information orts, laboratory repo- tion or examination stions or interrogato zed representative, e undersigned, inclu- not limited to clinic ar Examiners, or if f the foregoing. sentative, at their d may contain my na ery other person, f and request made he ction of such docum d further waives ab of an attorney unde	ama under the Const ma, hereby authorize ization or institution d fitness to perform t to said Board, or an orts, X-rays, or clinic s, consultation or co ries concerning the u and to appear before ding any information al abstracts, consulta ts authorized represe inscretion, to prepare ume. irm, officer, corpor erein from any and a ments, records and ot solutely any privileg r the laws of Alabam	itution of the State and request every having control of the responsibilities y such documents, cal abstracts which nsultations, test or indersigned which said Board, or its n furnished by the tions, evaluations, entative, and fully e for immediate or ation, association, Il liability of every her information or e he/she may have		
In witness whereof, I have set my hand a	nd seal this _		day of		, 20		
Signature of Applicant							
STATE OF							
COUNTY OF							
I, an officer duly authorized to administer oaths a	nd take ackno	wledgment	s hereby certify th	nat on this day ners	sonally appeared before me		
	nu une uenne	5 wredginen	s, norce y certify a	in on this day poin	ionally appeared before me		
	Applican	nt Name					
to me well known to be the person described in a that he/she executed the same freely and voluntar				nd he/she acknowl	edged before me		
WITNESS my hand and official seal at the	he City of		, C	County of			
and State of	this the		day of		, 20 .		
Notary Public							
		Commissio	n Expires				
All forms of Authorization and Release executed Bar shall terminate immediately upon admission withdrawal of an application the applicant.	d by student						
I, Terri B. Lovell, as Secretary of the Alabama Bo pplicant has not notified this Board of the termine o the Alabama State Bar.			• •		-		
DATE							

Secretary, Alabama Board of Bar Examiners

DEAN'S CERTIFICATION

INFORMATION TO BE COMPLTED BY THE APPLICANT:

NAME OF APPLICANT

NAME OF LAW SCHOOL

STREET OR POST OFFICE BOX

CITY, STATE, ZIP

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INFORMATION TO BE COMPLTED BY CERTIFYING OFFICIAL:

THIS IS TO CERTIFY that the above named law school announced its official

opening day of school to be ______ in the year 20_____

(year of above named applicant's entry into said law school).

DEAN OR CERTIFYING OFFICIAL

TITLE OR POSITION