

Utah State Bar  
Office of Admissions  
645 South 200 East  
Salt Lake City, Utah 84111-3834  
(801) 531-9077  
Web site: [www.utahbar.org](http://www.utahbar.org)

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**UTAH STATE BAR  
AMENDMENT TO APPLICATION FOR ADMISSION**

RETAIN THIS ORIGINAL AND MAKE PHOTOCOPIES AS NEEDED TO AMEND YOUR APPLICATION.

This form must be typewritten and notarized.

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Application Number: \_\_\_\_\_

I, \_\_\_\_\_, understand my continuing obligation to report changes to my Application, in writing, within 30 days of occurrence. For this reason, the following additional information is provided to amend the Application currently pending with the Utah State Bar.

This amendment applies to Question(s) \_\_\_\_\_ of my Application.

Applicant's Signature: \_\_\_\_\_  
Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, A. D.

Notary's signature: \_\_\_\_\_  
My commission Expires on: \_\_\_\_\_  
(S E A L)

THIS FORM MAY NOT BE USED FOR PURPOSES OF FILING FOR A NEW EXAMINATION DATE.

**Utah State Bar  
Office of Admissions  
645 South 200 East  
Salt Lake City, Utah 84111-3834  
(801)531-9077  
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**REAPPLICATION FOR ADMISSION, AUTHORIZATION AND RELEASE, CODE OF  
CONDUCT AGREEMENT**

*(To be completed by Examination Applicants Only)*

**Download the "Amendment to Application for Admission" form.**

MAKE PHOTOCOPIES OF THE "AMENDMENT" FORM AS NEEDED TO AMEND YOUR APPLICATION

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1. **Applicant Full Name\*:** \_\_\_\_\_  
( First Name, Middle Initial, Last Name)

\* Please provide your name as you would like it to permanently appear on Utah State Bar records.

2. **Social Security Number<sup>1</sup>:** \_\_\_\_\_  
(999-99-9999)

3. **Select Applicant Type\* (please select only one):**

- Admission by Examination Applicant Types
  - Student Applicant taking Student Exam
  - Attorney Applicant taking Attorney Examination
  - Attorney Applicant taking Student Examination (Student/Attorney)
  - Foreign Attorney Applicant taking Student Examination
  - Disbarred Attorney Applicant taking Student Examination

*For an explanation of the applicant types please see Rules 3 and 4 of the Rules Governing Admission to the Utah State Bar*

4. **Date of Bar Examination previously taken:            Month:            Year:**

5. **Date of Bar Examination you wish to take:            Month:            Year:**

**Mailing Address:** \_\_\_\_\_  
(Address Line 1)  
\_\_\_\_\_  
(Address Line 2)  
\_\_\_\_\_  
(City, State, Zip )

6. **E-mail Address:** \_\_\_\_\_

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<sup>1</sup> Providing this information is voluntary pursuant to the Federal Privacy Act of 1974. Your social security number, however, assists in expediting the character and fitness review process and as such, will be used for purposes of investigation only in order to avoid errors of identity. Omission may result in your approval to sit for the examination being postponed.

7. **Primary Telephone Number:** \_\_\_\_\_  
(999) 999-9999

**Secondary Telephone Number:** \_\_\_\_\_  
(999) 999-9999

8. **Attorney and Student/Attorney Applicants:** Please attach a current, original Certificate of Good Standing from the highest court or the Bar Association of each jurisdiction where you are admitted.

9. Have you taken an **exam in another jurisdiction(s)** where the results are still pending or have you been admitted to another jurisdiction(s) since your last Application?  **Yes**  **No**

If yes, give jurisdiction(s): \_\_\_\_\_

Date of examination(s) taken (MM/YY): \_\_\_\_\_

Results (if applicable): \_\_\_\_\_

10. Attach a current, signed and notarized **Authorization and Release** (*below*).

11. Applicants reapplying to the Utah State Bar must **submit a current FBI Background Check** with the Reapplication for Admission. Obtain a finger fingerprint card at your local law enforcement agencies or from the Utah State Bar. Attach the completed fingerprint card request form (*below*) and mail to the FBI, as instructed on the form. FBI processing can take 4 - 8 weeks.

12. Attach a current signed and notarized **Code of Conduct Agreement** (*below*)

13. I wish to complete the written portion (essays and MPT questions) of the exam by:

**WRITING**  **COMPUTER\***

\* **See Filing Instructions and Information section regarding system requirements and mandatory pre-installation procedures. The computer fee is \$100.00 (non-refundable). Please include the computer fee when filing your Reapplication for Admission.**

14. I have a **DISABILITY** for which I am requesting test accommodations.  **Yes**  **No**

**Test accommodations will not be granted to those who fail to file applicable Test Accommodation Forms I – N along with the required supporting medical documentation.** (See the Section on Testing Accommodations in the *Filing Instructions and Information* for specific details.)

**IF THERE HAS BEEN A CHANGE IN THE FOLLOWING INFORMATION SINCE YOUR LAST APPLICATION, PLEASE RECORD THE CHANGE. IF THERE IS NO CHANGE, SO INDICATE.**

15. **MARITAL STATUS:**  Single  Married  Separated  Divorced  Widowed  
Date of marriage (s) and full name of spouse:

\_\_\_\_\_  
(LAST, First MI MM/DD/YYYY)

If separated or divorced, **attach copies of the Complaint and Final Decree** in each instance.

(a) Was alimony or child support required of you?  Yes  No

(b) Are you in full compliance with such support payments?  Yes  No

If yes, attach a copy of payment history.

**If no, give a full explanation.**

**16. Work Experience:**

a. Since your last Application, have you been discharged or have you resigned from any employment after being told that your conduct or work was not satisfactory or that you were suspected of or was under investigation for any wrong-doing?  Yes  No

**If yes, complete an "Amendment to Application for Admission" form for each such occurrence.**

b. Since your last Application has your employment changed?  Yes  No

**If yes, complete an "Amendment to Application for Admission" form updating your employment information.**

**17. Criminal Activity:** Since your last Application, have you been served with a criminal summons, questioned, arrested, taken into custody, indicted, charged with, tried for, pleaded guilty to or convicted of, or been the subject of an investigation concerning the violation of any law. (Include all traffic offenses in your answer except parking offenses).  Yes  No

**If yes, complete an "Amendment to Application for Admission" form and Form F for each such occurrence.**

**18.** Are you in violation of any federal or state criminal statute(s)?  Yes  No

**If yes, complete an "Amendment to Application for Admission" form and Form F for each such occurrence.**

**19.** Since you filed your last Application, are there any unsatisfied judgment against you?  Yes  No

**If yes, complete an "Amendment to Application for Admission" form and Form B for each such occurrence.**

**20.** Since you filed your last Application, have you had any debts which are at least 90 days past due?

Yes  No

**If yes, complete an "Amendment to Application for Admission" form and Form B for each such occurrence.**

**21.** Since you filed your last Application, have you filed bankruptcy?  Yes  No

**If yes, complete an "Amendment to Application for Admission" form and Form C for each such occurrence.**

22. Since you filed your last Application, have you had a credit card revoked?  Yes  No

**If yes, complete an "Amendment to Application for Admission" form and Form B for each such occurrence.**

23. **ETHICS EXAM.** Before admission to the Utah State Bar, each applicant must have passed the MPRE. Effective February 2005, all applicants must have attained a scaled score of 86 on the Multistate Professional Responsibility Examination ("MPRE").

Have you taken the MPRE exam?  Yes  No

**If yes, indicate:**                      **Date of Exam** \_\_\_\_\_ **Scaled Score** \_\_\_\_\_  
(MM/DD/YYYY)

**If no, indicate the date of the exam you have registered to take the exam:** \_\_\_\_\_  
(MM/DD/YYYY)

Have you requested the transfer of your MPRE scores to Utah?  Yes  No  
(See MPRE Section of *Filing Instructions and Information* for MPRE requirements.)

**NOTE: Applicants who are reapplying do not need to provide additional character references.**

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***Applicant: Attach appropriate application fee plus the \$100 computer fee and/or late fee, if applicable.***



**REAPPLICATION - AUTHORIZATION AND RELEASE**

STATE OF \_\_\_\_\_)

: ss

County of \_\_\_\_\_)

I, \_\_\_\_\_, born \_\_\_\_\_  
*(Applicant Name)* *(Birth Date)*

at \_\_\_\_\_, having filed an application for admission to the Utah State Bar,  
*(City, State, Country)*

hereby apply for a character report. I consent to an investigation, as deemed necessary by the Bar, as to my moral character, professional reputation and fitness for the practice of law. I agree to give any further information which may be required in reference to my past record. I understand that I will not receive and am not entitled to a copy of the report or to know its contents, and I further understand that the contents of my character report are privileged.

I also authorize and request every person, firm, company, corporation, educational institution (including law school), creditor, consumer credit reporting service, governmental agency, court, health care facility and/or provider, association or institution having control of any documents, records, and other information pertaining to me to furnish to the Utah State Bar or the National Conference of Bar Examiners any such information, including documents, records, bar association files regarding applications for admission, and charges or complaints filed against me, (formal or informal and/or pending or closed) or any other pertinent data, and to permit the Utah State Bar and the National Conference of Bar Examiners or any of their agents or representatives to inspect and make copies of such documents, records and other information.

I release the Board of Bar Commissioners and the Bar's employees, committees, and their agents from liability for damages for conduct and communications occurring in the performance of and within the scope of their official duties in processing this application to the Utah State Bar. I release from liability for damages every person, firm company, corporation, educational institution (including law school), governmental agency, court, health care facility and/or provider, association or institution from disclosure of any documents, records, statements of opinion, and other information pertaining to me communicated without malice to the Board or the Bar's employees, committees and their agents.

I specifically acknowledge that the Utah State Bar and its designated agents are authorized to request the Utah Bureau of Criminal Identification or its successor, in conjunction with the Federal Bureau of Investigation, to conduct a national criminal history record check for purposes of ascertaining the character and fitness of the applicant for admission to the Bar.

I authorize the Utah State Bar or any of their agents or representatives to obtain credit reports and further documentation relating to the same.

I specifically authorize the Utah State Bar to obtain any information from my official record on file with any Local Board Number of the Selective Service System; and hereby consent to and authorize the release of such information by the Selective Service System.

I hereby request and authorize the Department of the Defense, the Army, Navy, Air Force, Coast Guard, or any military service to furnish to the Utah State Bar the record of each period of my service therein, and to furnish the character of service rendered for each period. My serial number was \_\_\_\_\_.

I hereby release, discharge, exonerate the Utah State Bar and the National Conference of Bar Examiners, their committees, agents and representatives, and any person or entity furnishing any information, 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 Utah State Bar or the National Conference of Bar Examiners or by any agency or person associated with them.

I hereby certify that I will not share the content of the Multistate Bar Examination with any individual, organization, or agency that may use that information for commercial purposes.

I have read the foregoing Application and this Authorization and Release and have answered all questions fully and frankly. The answers are complete and are true of my own knowledge.

\_\_\_\_\_  
Signature of Applicant

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STATE OF \_\_\_\_\_)

: ss

County of \_\_\_\_\_)

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared before me \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is signed on the foregoing Application, and acknowledged to me that he/she has read and understands the contents thereof and that the information contained in the foregoing Application is true and correct as to his/her own knowledge, information and belief.

\_\_\_\_\_  
NOTARY PUBLIC

My Commission Expires:

Residing at:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



**EXAMINATION REGULATIONS AND CODE OF CONDUCT**  
**FOR APPLICANT TO THE UTAH STATE BAR**

Please read the following Examination Regulations and Code of Conduct and initial on the appropriate line by each numbered paragraph to indicate that you have read and understand it. Sign and notarize the statement at the bottom of the page. This must be filed with your completed Application and fees.

Any applicant who engages in cheating or conduct that disrupts or attempts to disrupt the Bar examination process or who breaches any examination regulation is subject to sanctions which may include, but are not limited to the following:

- (i) Ejection from the exam site.
- (ii) Forfeiture of all fees paid by the applicant.
- (iii) Nullification of the examination taken or the application made by such applicant.
- (iv) Transmission of a written report on the matter to the Character and Fitness Committee. The Character and Fitness Committee may thereafter revoke approval to sit for the Bar examination in the future.
- (v) Transmission of a written report of the matter to the Bar in any jurisdiction where the applicant is currently licensed, or applies for admission.

**ADMISSION REGULATIONS:**

One or more of the above sanctions may apply if it appears to the Bar that there is credible evidence to establish that the applicant has:

- \_\_\_1. Falsified the application or proofs required for admission to practice, with or without examination.
- \_\_\_2. Falsified documentation submitted in support of a request for test accommodations or secured such documentation under false pretenses.
- \_\_\_3. Utilized any unauthorized notes, books, recordings, electronically retrievable data or other unauthorized materials while taking the Bar examination, or secreted such materials for such use.
- \_\_\_4. Obtained or used answers or information from or given answers or information to another person or source during the administration of the Bar examination.
- \_\_\_5. Falsified or misrepresented information required for admission to the examination site, impersonate another applicant or have an impersonator take any part of the examination on the applicant's behalf.
- \_\_\_6. Written or designated any answers to questions on the Bar examination prior to the announcement of the beginning of the examination session or after the announcement of the conclusion of the test session.
- \_\_\_7. Erased or otherwise altered an examination answer after the announcement of the conclusion of the test session.
- \_\_\_8. Removed any examination materials or other notes made during the examination from the examination room or shared the content of the examination with any individual, organization or agency that may use the information for commercial purposes.
- \_\_\_9. Refused to allow proctors to search them at any time during the examination.
- \_\_\_10. Brought briefcases, backpacks, purses, books, notes, written or printed material or data of any kind into the test area or had possession of such material during the administration of the examination.
- \_\_\_11. Brought cell phones, pagers, calculators, beeping watches, alarms, palm pilots or other personal digital assistants into the test area.
- \_\_\_12. Brought a firearm, explosive device, or any type of sharp object such as a razor blade, boxcutter or knife, or any other dangerous material into the test area.
- \_\_\_13. Created a continuing distraction by sound, movement, or smell which disrupts the concentration of another applicant, whether in or outside the test area.
- \_\_\_14. Gathered with other applicants in the restroom or in any areas adjacent to the test area while the examination is in progress.
- \_\_\_15. Became physically or verbally abusive to the Admissions staff, a proctor, or any Bar employee during the administration of the examination or at any time during the admissions process.

**I have read the above Examination Regulations and Code of Conduct and agree to abide by the same. I understand that a violation of any of these regulations could result in the sanctions above being imposed.**

\_\_\_\_\_  
Print Name of Applicant

\_\_\_\_\_  
Signature of Applicant

STATE OF \_\_\_\_\_)

: ss

County of \_\_\_\_\_)

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared before me \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is signed on the foregoing Application, and acknowledged to me that he/she has read and understands the contents thereof and that the information contained in the foregoing Application is true and correct as to his/her own knowledge, information and belief.

\_\_\_\_\_  
NOTARY PUBLIC

My Commission Expires:

\_\_\_\_\_  
\_\_\_\_\_

Residing at:

\_\_\_\_\_  
\_\_\_\_\_

**INSTRUCTIONS FOR FINGERPRINT CARD**

Fingerprint cards can be obtained at your local law enforcement agencies or, from the Utah State Bar. Some law enforcement agencies may charge a small fee for fingerprinting service. Attach your fingerprints to the Federal Bureau of Investigation form. **DO NOT FOLD OR STAPLE.** Enclose the processing fee payable by **CERTIFIED CHECK** or **MONEY ORDER**. Do not send a personal check. **Complete the information on the top half of the card as follows:**

FINGERPRINT CARD SECTION NAME	INFORMATION YOU MUST ENTER
Signature of Person Fingerprinted	Your signature
Residence of Person Fingerprinted	Your current address
Date/Signature of Official Taking Fingerprints	Insure that you get a signature
Employer and Address	You may indicate your law school if you are a student, otherwise enter your employer
<b>Reason Fingerprinted</b>	<b>Enter "Personal Review"</b>
Last Name, First Name, etc.	Enter your information. Suffix denoting seniority (Jr., Sr., II, etc.) should follow the middle or first name.
Aliases <u>AKA</u>	Enter all names by which you have been known (maiden, etc.)
Citizenship <u>CTZ</u>	Enter U.S. if citizen of United States, otherwise enter correct country abbreviation.
Your OCA No. <u>OCA</u>	Leave Blank
FBI No. <u>FBI</u>	Leave Blank
Armed Forces No. <u>MNU</u>	Leave Blank
Social Security No. <u>SOC</u>	Enter your Social Security Number
Miscellaneous No. <u>MNU</u>	Leave Blank
Date of Birth <u>DOB</u>	Enter in numerals (very important to complete this section)
Sex	Enter M or F
Race	Enter <b>A</b> (Asian, Pacific Islander, Chinese, Japanese, Polynesian, Korean, Vietnamese); <b>B</b> (Black, African American, African); <b>I</b> (American Indian, Alaskan Native, Eskimo); <b>U</b> (Unknown, all other races not listed); <b>W</b> (White, Mexican, Latin, Puerto Rican, Cuban, Central/South American, and other Spanish origin)
HGT	Enter your height
WGT	Enter your weight
EYES	Enter your eye color
HAIR	Enter your hair color
Place of Birth <u>POB</u>	Enter your place of birth

**Federal Bureau of Investigation - Request for Background Check**  
**ATTN: Record Request Unit**  
**1000 Custer Hollow Road**  
**Clarksburg, West Virginia 26306**

Date: \_\_\_\_\_

I am requesting a personal identification criminal history background check for my own personal review. Per your requirements, I am including a standard fingerprint card and **a certified check or money order for \$18.00 payable to the U.S. Treasury**. Please provide me with a written response to the address listed below. I understand that it may take four to eight weeks for the FBI to perform this background check. Thank you for your attention to this matter.

Signed: \_\_\_\_\_

Full Name: \_\_\_\_\_  
(First Middle Last)

Mailing Address: \_\_\_\_\_  
Street or P. O. Box

\_\_\_\_\_  
Street or P. O. Box

\_\_\_\_\_  
City / State / Zip Code

Telephone: \_\_\_\_\_  
(Area Code) Phone Number

**NOTICE OF  
MEDICAL ALERT**

If you have a medical condition (such as diabetes, heart disease, epilepsy, or any other condition that might require emergency medical attention during the examination), you are requested to list on the form below your name, the nature of the condition, emergency treatment instructions and the name and telephone number of any person(s) who should be contacted in the event of an emergency. If there are any items that you need to bring with you into the examination, such as food, medicines, etc., please list those items below as well. Upon receipt of you completed Notice of Medical Alert, a letter will be sent to you acknowledging receipt and providing authorization of those items that may be brought into the examination due to your reported medical condition. ***This form must be filed with your completed application and fees.***

\_\_\_\_\_  
Applicant's Name (typed)

\_\_\_\_\_  
Bar Exam Date

\_\_\_\_\_  
Applicant's Signature

**Medical Condition:** \_\_\_\_\_

**Emergency Instructions:**

\_\_\_\_\_  
Person to Contact in Case of Emergency (type)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Person to Contact in Case of Emergency (type)

\_\_\_\_\_  
Phone Number