



National Conference of Bar Examiners

REQUEST COPY OF PRIOR APPLICATION

• I, _____, request a copy of my original NCBE character and fitness application filed on _____ for admission to the jurisdiction (*list only one*) of _____.

Home Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail Address: _____

NCBE Number _____ Date of Birth: _____

Signature: _____

NOTE: If the above application was made under a different name, please provide the following:

Name on application: _____

Signature as it appears on that application: _____

***PLEASE NOTE: Applications to jurisdictions not listed in the drop down menu are not available from NCBE. All applications may not be on file in this office and NCBE does not retain applications indefinitely. You may contact the NCBE Intake Department (intake@ncbex.org) to confirm availability.**

• **SHIPPING METHOD (All physical delivery methods will require a signature.)**

- Secure download (Link and password will be sent to the email address listed in your NCBE Account.)
- Certified first-class mail
- FedEx (Additional FedEx shipping fee applies): FedEx Priority Overnight FedEx Standard Overnight FedEx 2-Day

• **SHIPPING DESTINATION (Choose only one option.)**

Please send the copy to the bar admission authority of (*jurisdiction*) _____

Jurisdiction Shipping Address: _____

City: _____ State: _____ Zip Code: _____

I understand that making this request does NOT constitute a completion of the application process for admission to the bar. NCBE does not warrant that the admitting authority will accept an application directly from NCBE.

Send the copy to my home address noted above. (Applications will only be sent to applicant's **home delivery address**.)

• **\$30 PAYMENT MUST ACCOMPANY THIS REQUEST.**

• **METHOD OF PAYMENT**

- Payment (check or money order payable to NCBE) is enclosed.
- Bill FedEx shipping fee to my FedEx Account: _____
- Charge the fee(s) to my credit card (MasterCard or Visa):

Card #: _____ Expiration Date: _____

Signature: _____ Date: _____

• **Mail or fax your request to the address/fax number below.**

302 South Bedford Street, Madison, WI 53703-3622 • 608-280-8550 • Fax: 608-442-7980 • TDD: 608-661-1275 • Web: www.ncbex.org

All information solicited and received for character reports is treated confidentially by NCBE and restricted to official use by the proper admitting authorities. NCBE is an affiliated organization of the American Bar Association