NOTIFICATION OF SPECIAL NEEDS

ABSENT GOOD CAUSE, NOTIFICATION SHALL BE FILED AT THE TIME OF THE APPLICATION BUT IN NO EVENT LATER THAN THIRTY (30) CALENDAR DAYS PRIOR TO THE FIRST DAY OF THE BAR EXAMINATION.

Check One Attorney A Regular Ap	pplicant 🗌			Applying For: July Bar Exam February Bar Exam	
. Applicant's	SNAME:				
	Las	st	First	Middle	
. Primary Em	ail address: _				

Note: The Primary Email address will be used for all future communication with Applicant and Applicant should immediately notify the Supreme Court of changes to email addresses.

- 3. Have you submitted an application to sit for a bar examination? Yes \Box No \Box If so, when was the application submitted? _____
- 3. Do you qualify as an applicant with a special need as provided by Rule of Admission 72-1(g)? Yes □ No □
- 4. Please describe the special accommodations that you are requesting with this notification. Be as specific as possible. Attach additional pages if necessary:

By signing this Notification of Special Needs, the Applicant hereby swears:

The information contained in this Notification and all accompanying documents are complete and true to the best of my knowledge. I understand that the information provided in this Notification and all accompanying documents is submitted under oath. I understand that all information provided in this application or in support of this application will be kept confidential as provided by Rule of Admission 70-6.

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Sin	nod
SIU	ned:

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Applicant

Postmark / Recd date:

FOR OFFICE USE ONLY

Recd by: Enclosed:

With App: Y / N