

THE STATE BAR OF CALIFORNIA  
OFFICE OF ADMISSIONS

180 HOWARD STREET  
SAN FRANCISCO, CA 94105-1617  
(415) 538-2300



845 S. FIGUEROA STREET  
LOS ANGELES, CA 90017-2515  
(213) 765-1500

**REGISTRATION AS A LAW STUDENT OR ATTORNEY APPLICANT**

**REGISTRATIONS MUST BE TYPEWRITTEN OR LEGIBLY PRINTED IN INK. STAPLE all attachments to the front of the registration.** (This is **not** an application for an examination or for a moral character determination. Attach additional pages if necessary. Please read the "Instructions for Registration as a Law Student or Attorney Applicant" before completing this form.)

1.1 **U.S. SOCIAL SECURITY NUMBER:** (Required; Refer to Instructions)

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

1.2 **DATE OF BIRTH:**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Month Day Year

1.3 **APPLICANT TYPE:** (Please check one)

- General Applicant
- Attorney Applicant

<b>OFFICE USE ONLY</b>
<b>DATE ENTERED/BY:</b>
_____/_____/_____ Mo. Day Yr. Initials
<b>DATE APPROVED/BY</b>
_____/_____/_____ Mo. Day Yr. Initials

1.4 **REGISTRANT'S NAME:**

\_\_\_\_\_  
Last First Middle

1.5 **EMAIL ADDRESS:** \_\_\_\_\_

1.6 **MAILING ADDRESS:** (It is the registrant's responsibility to inform the State Bar's Office of Admissions in writing of any address change. All correspondence will be mailed to your current mailing address.)

\_\_\_\_\_  
Number/Street and Apartment Number

\_\_\_\_\_  
Address Continued

\_\_\_\_\_  
City or Non-USA City and Country State Zip (U.S.)

1.7 **TELEPHONE NUMBER:** ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

1.8 **APPLICANT'S BIRTHPLACE:** \_\_\_\_\_  
City or Town State or Country

1.9 **MOTHER'S FULL MAIDEN NAME:** \_\_\_\_\_

2.0 **REGISTRATION FEE** (See fees and payment coupon on page 5):

Registration Fee Enclosed      \$ \_\_\_\_\_

2.1 **NAMES, FORMER NAMES AND ALIASES** – If you have ever been known by any other name(s), please state below and provide the effective dates:

\_\_\_\_\_  
Last                      First                      Middle                      DATES: From                      /                      To

2.2 **LEGAL EDUCATION** – Please indicate below the law school(s) you are currently attending, the law office or judge's chambers where you are studying law and any previously completed law study:

Name, City, State, Country of Law School	Dates Attended:		Graduation Date Mo/Yr	Degree or Units Completed
	From Mo/Yr	To Mo/Yr		
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2.3 **SPECIAL STUDENT** (A "special student" is a student enrolled in a California-accredited law school who qualified to begin the study of law through CLEP scores, which were obtained prior to beginning the study of law.) – Are you a special student at an accredited law school?

Yes               No

2.4 **FIRST-YEAR LAW STUDENTS' EXAMINATION REQUIREMENT (FYLSX)** – Are you entitled to exemption from the FYLSX? (See Instructions)

Yes               No

2.5 **GENERAL EDUCATION** – I have complied with the pre-legal education requirements for admission to practice law in California by:

- Completing at least two years of college work from the following universities or colleges; or
- Passing the required College-Level Examination Program (CLEP) examinations. (See bulletin on the CLEP.)

(Law students without a Bachelor's Degree are required to attach transcripts of all pre-legal study. Law students pursuing eligibility based on passing the CLEP examinations must attach score reports.)

Name, City and State of School	Dates Attended:		Graduation Date Mo/Yr	Degree or Units Completed
	From Mo/Yr	To Mo/Yr		
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2.6 **PRIOR ADMISSION TO PRACTICE LAW** – Attorney Registration Applicants Only:

\_\_\_\_\_  
State/Country      Mo/Yr              State/Country              Mo/Yr              State/Country              Mo/Yr

## REGISTRATION APPLICANT DECLARATION

### THE FOLLOWING DECLARATION MUST BE SIGNED AND CANNOT BE AMENDED BY THE APPLICANT

The person named as the registrant in the foregoing law student/attorney applicant registration, declares:

I have carefully read the questions in the foregoing registration and have answered them truthfully, fully and completely, without mental reservation of any kind.

I hereby authorize educational or other institutions or agencies to release to the Committee of Bar Examiners and the Office of Admissions of the State Bar of California any information, files or records requested in connection with the processing of this registration.

I understand that I must comply with all the requirements of the *Admissions Rules* (Title 4, Division 1 of the *Rules of the State Bar of California*).

I declare under penalty of perjury under the law of the State of California that my answers to the foregoing registration questions and all statements by me herein are true and correct.

Executed on \_\_\_\_\_  
(Date)

at: \_\_\_\_\_  
(Street and Number)

\_\_\_\_\_  
(City, State, Zip, Country)

**PRINT:** \_\_\_\_\_  
(First Name) (Last Name)

**SIGN HERE:** \_\_\_\_\_  
(Signature of Declarant)

## ETHNIC SURVEY

The following information is to be furnished by each applicant as part of the application process. The Committee of Bar Examiners is gathering this data to assist in the continuing evaluation of the examination. This information will be treated in a confidential manner and will be used only for research purposes. It will not be retained by the Committee as part of your application.

1. What is your sex?  Male (1)  Female (2)

2. Which one of the following racial or ethnic groups **best** describes you? **Mark only one.**

(1)  American Indian or Alaskan Native  
(Descended from any of the original peoples of North America.)

(6)  Hispanic  
(Mexican, Puerto Rican, Cuban, Central or South American & Spanish - but not Portuguese)

(2)  Filipino

(7)  Black  
(Excludes persons of Hispanic origin)

(3)  Pacific Islander  
(Melanesian, Micronesian, Polynesian)

(8)  White  
(Includes persons having origins in any of the original peoples of Europe, Russia, North Africa and the Middle East - and generally corresponds to those persons not classified into one of the 7 specific minority categories)

(4)  Origins in Indian sub-continent  
(Pakistan, Indian, Bengal, etc.)

(5)  Asian  
(Includes Chinese, Japanese, Korean and the peoples of Malaysia and Southeast Asia)





THE STATE BAR OF CALIFORNIA  
COMMITTEE OF BAR EXAMINERS/OFFICE OF ADMISSIONS

180 Howard Street • San Francisco, CA 94105-1617 • (415) 538-2300  
845 S. Figueroa Street • Los Angeles, CA 90017-2515 • (213) 765-1500

Office of Admissions Fees Only – Credit Card Authorization Form

For credit/debit card payments, a processing fee of 2.25% will be added to all charges. If your credit/debit card transaction is denied, you will not be able to submit your application or your request processed until you provide another Mastercard or Visa.

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

I authorize the State Bar of California to charge my credit card for \$\_\_\_\_\_

Please check which fee(s) you are paying for:

- |                                                                 |                                                                  |
|-----------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> Registration as a Law Student          | <input type="checkbox"/> Laptop Fee                              |
| <input type="checkbox"/> Registration as an Attorney Applicant  | <input type="checkbox"/> Laptop Late Fee                         |
| <input type="checkbox"/> California Bar Examination             | <input type="checkbox"/> Moral Character Determination           |
| <input type="checkbox"/> California Bar Examination Late Fee    | <input type="checkbox"/> Moral Character Determination Extension |
| <input type="checkbox"/> First-Year Law Students' Examination   | <input type="checkbox"/> Other: Please specify:                  |
| <input type="checkbox"/> First-Year Law Students' Exam Late Fee | _____                                                            |

(This form may not be used to pay dues or other attorney fees; it only may be used to pay fees related to Admissions. Please print legibly.)

Name of Applicant if Different than Card Holder (print legibly):

\_\_\_\_\_

File Number of Applicant (if previously registered with the State Bar of California's Office of Admissions as a law student or attorney applicant):

\_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Credit Card Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_  
Month/Year

Check Credit Card Type:  Master

Visa

Name on Card (print legibly): \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_