## **Board of Law Examiners**

Kansas Judicial Center, 301 S.W. 10th Avenue, Topeka, Kansas 66612

### To: Applicants for the Bar Examination in Kansas

Check to make sure you have the current application packet. Then review the application packet, noting the application deadline. It is, of course, desirable to file in advance of the deadline. Any applicant who wishes to file a completed application for admission after the filing deadline, but on or before November 1 (for the February examination) and on or before April 1 (for the July examination), must pay a late penalty fee in the amount of \$200 in addition to the application fee. Only complete applications will be accepted. See Supreme Court Rule 722.

Kansas requires that your undergraduate and law transcripts be sent directly to the Board from the college or university. E-transcripts can be sent to admissions@kscourts.org. Request final transcripts far enough in advance that they are received by the Board no later than January 15<sup>th</sup> for the February examination and June 15<sup>th</sup> for the July examination. See Supreme Court Rule 711.

If you are admitted to practice in another state, you must obtain a certificate of good standing, a disciplinary authority certificate, and a continuing legal education certificate from each state in which you are admitted. Certificates of good standing are usually issued by the Clerk of the Supreme Court, and the disciplinary authority certificate by the appropriate disciplinary governing board. Certificates of continuing legal education should be obtained from the entity responsible for monitoring compliance in that state. Continuing legal education certificates must include proof of compliance with both fee payments and required hours. Certificates of good standing, disciplinary authority certificates, and continuing legal education certificates will not be accepted by the Board if they are more than 90 days old at the time the application is accepted by the Board.

All applicants for the Kansas Bar are required to submit a completed fingerprint card and the required waivers as a part of the character and fitness investigation. Fingerprint card waivers are available through the website. Your application will not be accepted until the completed fingerprint packet is received.

If you are transferring an MBE score earned within 13 months of the current examination and you successfully passed the entire bar examination in the other jurisdiction in one sitting, you must contact the state from which the score is being transferred to determine their procedure for transferring the score to Kansas. This score must be received no later than January 15<sup>th</sup> for the February examination and June 15<sup>th</sup> for the July examination if the score is to be used. Failure to timely submit an MBE score will result in the applicant sitting for both days of the examination.

All applicants must obtain a minimum scaled score of 80 on the MPRE to be admitted in Kansas.

You will be advised in writing at the time your application is accepted if your transcripts, MPRE score, or MBE score are not on file at the time of filing. **This will be your only notice.** Failure to submit items by the stated deadlines will result in your removal without further warning.

# KANSAS

# APPLICATION FOR ADMISSION TO THE BAR OF THE STATE OF KANSAS

## BY

## WRITTEN EXAMINATION

### **IMPORTANT**

Commensurate with what Kansas expects of its' practicing attorneys, it is the applicant's responsibility to ensure that all necessary material is included with your application. Failure to do so <u>will</u> result in the return of your application. See Rule 713.

**Examination dates:** The last Tuesday and Wednesday of February & July

Filing fees and deadlines: \$700

Application must be received by:

• October 1<sup>st</sup> for a February examination

• March 1<sup>st</sup> for a July examination

Completed Applications received after the filing deadline, but on or before November 1<sup>st</sup> (for February examinations) and on or before April 1st (for July examinations), shall pay a late penalty fee in the

amount of \$200 in addition to the application fee.

Checks payable to: Clerk of the Supreme Court

Address for filing applications:

KANSAS BOARD OF LAW EXAMINERS

KANSAS JUDICIAL CENTER

301 SW 10TH AVENUE TOPEKA, KS 66612-1507

(Applications may be delivered in person; however,

your application will be reviewed in the order it was received. In the event that your application is incomplete, it will be returned

to you by first class mail.)

**Telephone No.:** (785) 296-8410

**E-mail:** admissions@kscourts.org

# READ THE FOLLOWING BEFORE YOU BEGIN

- 1. Read the entire application carefully **before** making entries.
- 2. Entries must be typewritten or the application completed on-line using Adobe.
- 3. You will need to obtain an NCBE number to complete this application. If you do not already have an NCBE number, you may register for one at <a href="http://www.ncbex.org">http://www.ncbex.org</a> under the link "Get an NCBE Number."
- 4. Answer all questions within the application, following the instructions for each question exactly. Every question requires an answer.
- 5. Use your full legal name no initials.
- 6. Avoid abbreviations.
- 7. When supplementing answers, be complete. If additional space is needed for your answer, attach an additional page of explanation immediately following the page on which the question occurs.
- 8. When additional documentation is required, attach the necessary documents **immediately** following the page on which the question occurs.
- 9. Original signatures are required on several pages throughout the application. All signatures, with the exception of the photo identification sheet, must be notarized. Always sign in **BLUE INK.**
- 10. **All** lines on the notary certificate must be completed, including the State and County. All signatures must be completed in BLUE INK. A **complete** notary certificate must include a seal or notary stamp.
- 10. Submit your completed application in order. Remember to attached required supplemental documents immediately following the page with the question the document pertains to.
- 11. Include the required filing fee. Checks should be made payable to: Clerk of the Supreme Court.

- 12. Submit one original completed application and one exact copy of the completed application including all required supplemental material.

  Incomplete applications will be returned and not considered filed. It is the applicant's responsibility to ensure that all necessary material is attached to the application.
- 13. Make and keep a copy of your application for your records.
- 14. Obtain and complete a Kansas Bar Examination Fingerprint Packet to submit with your completed application. Fingerprint packets are available through this office. To obtain a fingerprint packet complete the form on the website or contact the Board.
- 15. DO NOT call the Board to ask whether your application has been received. Mail "certified" or other trackable method if you need confirmation.
- 16. Keep the Board advised of **any** change that occurs after the filing of your application. As stated in the continuing obligation oath, you are required to notify the Board in writing within 5 days of **any** event which would change your response to any question on the application. This obligation continues until you are sworn-in to the bar.
- 17. Reread the instructions and check the Board's web page for bar applicants before calling with questions. If you do not locate the answer, please contact the Board by e-mail at <a href="mailto:admissions@kscourts.org">admissions@kscourts.org</a>, or by phone at (785) 296-8410.

### **Rule 716**

### ADMISSION TO THE BAR BY EXAMINATION

- (a) **Eligibility**. An applicant for admission to the Kansas bar by examination must be eligible under Rule 708.
- (b) Application.
  - (1) **Required Documents and Fee.** An applicant under this rule must submit the following:
    - (A) an application submitted and accepted through the Attorney Admissions office's online portal according to the time periods under subsection (b)(2);
    - (B) any other information the admissions attorney, the Attorney Admissions Review Committee, or the Board of Law Examiners requests for use in considering the application; and
    - (C) the fee under Rule 707(a)(2).
  - (2) **Time Periods.** The Board generally administers the bar examination in February and July.
    - (A) **Timely Application.** An application is timely if submitted within one of the following time frames:
      - (i) April 2 to October 1 for the February examination; or
      - (ii) November 2 to March 1 for the July examination.
    - (B) **Grace Period.** The Attorney Admissions office will accept an application that is no more than 30 days late if it complies with subsection (b)(1) and is accompanied by the late fee under Rule 707(a)(3).
    - (C) **Late Application.** The Attorney Admissions office will treat an application received after the expiration of the grace period as an application for the next bar examination.
  - (3) Nonstandard Testing Accommodation. An applicant seeking a nonstandard testing accommodation must submit a request and supporting documentation to the Attorney Admissions office by November 1 for the February examination or April 1 for the July examination. The Attorney Admissions office may approve an applicant's request for a nonstandard

- testing accommodation that does not jeopardize the security and integrity of the examination.
- (4) **Application Review Process.** The following rules apply in the application review process:
  - (A) Rule 723 and Rule 725 apply to the character and fitness investigation and any hearing; and
  - (B) Rule 724 applies following an adverse Board ruling.
- (c) **Updating an Application.** An applicant must update an application under the following circumstances.
  - (1) **Retaking the Examination.** If an applicant did not achieve a passing score on an examination and wishes to take the next examination administered, the applicant must update the application and pay the application fee under Rule 707(a)(2).
    - (A) **February Examination.** An applicant who did not achieve a passing score on the February examination must update the application no later than 30 days after the date of the letter stating that the applicant did not achieve a passing score.
    - (B) **July Examination.** An applicant who did not achieve a passing score on the July examination must update the application in accordance with the time periods in subsection (b)(2) and pay the late fee if applicable.
    - (C) **Delayed Retake.** If an applicant does not wish to take the next examination administered, the general provisions under subsection (b) apply.
  - (2) **Hold-Over Application.** If an applicant does not take the examination for which the applicant applied, the applicant must update the application. The Board may waive the application fee for a later examination if an applicant failed to take the examination due to any of the following circumstances:
    - (A) a delay in the investigation of the applicant's character and fitness;
    - (B) the need for a hearing on the applicant's character and fitness;
    - (C) actions of the admissions attorney, the Review Committee, the Board, or the Supreme Court;

- (D) the applicant's failure to achieve a passing score on the Multistate Professional Responsibility Examination; or
- (E) extenuating circumstances.
- (d) **Composition.** The Board administers the Uniform Bar Examination prepared by the National Conference of Bar Examiners, which consists of six Multistate Essay Examination questions, two Multistate Performance Test questions, and the Multistate Bar Examination.

## (e) Multistate Professional Responsibility Examination.

- (1) To be eligible to take the Uniform Bar Examination in Kansas, an applicant must achieve a minimum score of 80 on the Multistate Professional Responsibility Examination and ensure that the National Conference of Bar Examiners or the testing jurisdiction provides the score to the Attorney Admissions office.
- (2) The Attorney Admissions office must receive the official score no later than January 15 for the February examination and June 15 for the July examination.

# (f) Taking the Bar Examination.

- (1) **Proof of Identity.** At a bar examination, an applicant must provide proof of identity satisfactory to the Attorney Admissions office.
- (2) **Conduct.** Any conduct in violation of the instructions given to bar examinees on the day of the examination will be reported to the Board and considered for possible character and fitness review. The Board may refuse to score the examination of an applicant who fails to follow the instructions.
- (g) **Transferring a Multistate Bar Examination Score.** A first-time applicant may transfer a Multistate Bar Examination score achieved in another jurisdiction in lieu of taking the Multistate Bar Examination portion of the Uniform Bar Examination.
  - (1) Subject to the following provisions, the Board will accept a Multistate Bar Examination score achieved on a prior examination in another jurisdiction.
    - (A) The applicant must have taken the examination in the other jurisdiction no more than 13 months before the Kansas examination.
    - (B) The applicant must have successfully passed the entire bar examination in the other jurisdiction in one administration and

- achieved a minimum scaled score of 125 on the Multistate Bar Examination.
- (C) The applicant must notify the Attorney Admissions office at the time of submitting the application for admission to the Kansas bar that the applicant wishes to use a Multistate Bar Examination score achieved in another jurisdiction.
- (D) The applicant must ensure that the National Conference of Bar Examiners or the appropriate bar examination authority where the applicant took the Multistate Bar Examination provides the applicant's Multistate Bar Examination score to the Attorney Admissions office.
- (E) The applicant will not receive a Uniform Bar Examination score.
- (F) If the applicant fails to achieve a passing score on the Kansas examination, the applicant may not use the Multistate Bar Examination score transferred under this subsection in any succeeding Kansas examination.
- (2) The Attorney Admissions office will adopt procedures to ensure that scores transferred under this subsection are reported to the Board without disclosing the applicant's identity.
- (h) **Passing Score.** An applicant who achieves a minimum score of 266 on the Uniform Bar Examination is eligible for admission to the Kansas bar.
- (i) Procedure on Completion of Bar Examination.
  - (1) **Admission Granted.** If the Board recommends granting admission and the Supreme Court admits the applicant to practice in all Kansas courts, the applicant must take the oath under Rule 726.
  - (2) **Admission Denied.** If the Board denies admission because an applicant failed to achieve a passing score on the examination, the Board's decision is final.
  - (3) **Requests for Examination Responses.** The following provisions apply when the Board denies admission under subsection (i)(2).
    - (A) The applicant may review the applicant's answers to the Multistate Essay Examination and Multistate Performance Test upon request made no later than 90 days after the date the Attorney Admissions office notified the applicant of the Board's denial.

(B) Because confidentiality is required to protect the integrity of the examination, the applicant is not permitted to review or inspect questions asked or answers given on the Multistate Bar Examination.

# APPLICATION FOR ADMISSION TO THE BAR OF THE STATE OF KANSAS BY WRITTEN EXAMINATION

Docket No.	
	(KBLE will assign)

IN I	RE: APPLICATION OF	TAPE RECENT PASSPORT
	(Full Legal Name)	SIZE PHOTO
TO	THE SUPREME COURT:	HERE
	ACCORDANCE WITH THE RULES RELATING TORNEYS, I,  (Full Legal Name)	TO THE ADMISSION OF HEREBY
OF KA TH OF	LE THE FOLLOWING APPLICATION IN THE SUPRIFICATION FOR AND ADMISSION TO PRACTICE LAW IN A FRANSAS. TO EVIDENCE MY QUALIFICATIONS TO HOW THE FOLLOWING:	ATION CONDUCTED BY THE SUCCESSFUL COMPLETION LL COURTS OF THE STATE
1.	Full Legal name	
2.	List all other names you have been known by. Include the names and the reason for the name change. If the name change of the order immediately following this page.	•
3.	Present address. If your physical address is different from y both addresses, indicating which is the mailing address. Be and the county in all addresses.	• •
	Home or cellular telephone number Work telephone NCBE Number	e number
	E-mail address (do not list e-mail addresses maintained by ed	lucational institutions)

7. Dui	te of birth
8. Cit	y and State of birth
9. Sex	
10. Sc	ocial Security Number
11. He	eight
12. W	reight
13. Co	olor of Eyes
14. Co	olor of Hair
If an	ave you ever served in the Armed Forces of the United States or any other country?  Yes No  "yes,"provide a statement giving branch, dates of service, character of discharge, d details in the space below. If discharge was other than honorable, include a copy your discharge papers.
O1	your discharge papers.
	pouse's name, if applicable, and address if different from applicant's:
16. S <sub>f</sub>	

19.	Driver's License Number:
	State Issued:
	Expiration Date:

ATTACH A COPY OF YOUR CURRENT DRIVER'S LICENSE (FRONT AND BACK) IN THE SPACE PROVIDED BELOW. If you do not have a driver's license, state the reason why on a separate sheet immediately following this page and attach a copy of a state-issued Identification Card below. If your license is or has been restricted for any reason other than eye glasses or contacts, attach your explanation on a separate sheet immediately following this page.

20.	Are you a citizen of the United States? Yes No If claiming citizenship, other than by birth, state date naturalized, court and location, and naturalization number.
	If not a United States citizen, from what country do you claim citizenship?
	If not a United States citizen, describe your immigration status and provide your alien registration number and a copy of your resident alien card in the space below. If you do not have an alien registration number or resident alien card, explain in the space below.
	If you are not a United States citizen and do not have a resident alien card, provide a statemen explaining your legal status in the space below. You will also need to attach, immediately following this page, legal documentation showing by what means you are in the country legally

21. List each residence address (including your present address) you have had for the past ten years, starting with the most recent. List only the month and year of residence. There should be no gaps in time. The following is an example of how a listing should look:

1234 A Avenue, Town, Kansas 66666 August 2003 - present 7546 West 15<sup>th</sup> Street, City, Kansas 67777 April 2001 - July 2003

IF YOU NEED MORE SPACE THAN WHAT IS PROVIDED, ATTACH A SEPARATE SHEET IMMEDIATELY FOLLOWING THIS PAGE.

22. Are you currently employed? \_\_ Yes \_\_ No

In the space below, state name of employer, current address of employer, position held, dates of employment and reason for termination of employment for the past ten years, starting with the most recent. In the event the business is no longer in existence, list the last known address and indicate that the business is no longer in existence.

<u>Include periods of unemployment</u>. There should be **NO GAPS** in time. For the purpose of completing this section, use only month and year when listing the dates of employment. Sample entries follow:

ABC Manufacturing, 55567 Law Street, City Town, KS 66666 Laborer, August 2002 - Present, still employed

ZXY Communications, 88879 College, City Town, KS 66666 Salesman, July 2001 - August 2002, found a better job

IF YOU NEED MORE SPACE THAN WHAT IS PROVIDED, ATTACH A SEPARATE SHEET IMMEDIATELY FOLLOWING THIS PAGE.

Supreme Court Rule 711 requires proof that an applicant has been granted and holds the requisite undergraduate and JD degrees. Official transcripts issued by the registrar or equivalent officer of each institution granting such degrees, and sent directly from such office to the Board will provide sufficient proof of said degrees. **Transcripts submitted by the applicant will not be accepted.** Please read Supreme Court Rule 711 if you have questions about educational eligibility.

Both transcripts must be received by January 15<sup>th</sup> for the February examination and by June 15<sup>th</sup> for the July examination. If you are unable to meet this deadline, you must contact the Board for further instructions. Only final transcripts showing that the degree has been conferred will be accepted.

23. Provide the name of the school from which you received your undergraduate degree, the full address for the school, and the date your degree was conferred.

24. Provide the name of the school from which you received your juris doctor or bachelor of laws degree, the full address for the school, and the date your degree was conferred. If you have not yet graduated, list your expected date of graduation. Attach, immediately following this page, a copy of your law school application, including any amendments made to your application after admission.

25. List all <u>other</u> colleges or universities (including law schools) which you have attended, dates of attendance, degrees received (if any), and date of graduation if applicable. <u>DO NOT REQUEST TRANSCRIPTS FROM SCHOOLS ATTENDED WHERE A DEGREE WAS NOT EARNED.</u>

26. Have you ever been dropped, suspended, placed on scholastic or disciplinary probation, expelled or been requested to resign from any school, college or university, or otherwise subjected to discipline by any school or institution or requested or advised by any such school or institution to discontinue your studies there for reasons other than failure to maintain a minimum GPA? \_\_Yes \_\_No

If you answered "yes," provide a personal statement in the space below which includes: details of each accusation, its disposition, and the punishment imposed, if any. You will need to obtain a complete copy of the school, college, or university's file regarding this incident and attach it immediately following this page.

27. Despite whether the record has been expunged, canceled or annulled, or whether no record was made, have you ever been accused of personal or academic dishonesty at any school you attended or have you ever been subject to proceedings before a school honor court, honor council, or similar body? \_\_ Yes \_\_ No

If you answered "yes," provide a personal statement in the space below which includes: details of each accusation, its disposition, and the punishment imposed, if any. You will need to obtain a complete copy of the school's file and attach it immediately following your personal statement. If the school no longer has record of the incident, a written letter from the school may be substituted for a copy of the file.

28.	Have you ever previously made application to take the Kansas bar examination? Yes No
	If "yes," please indicate in the space below the date(s) of the examination(s) for which you previously applied, whether you took the examination, if you did not take the examination why you did not take the examination, or if you failed the examination.
29.	Have you ever applied for a Kansas legal intern permit pursuant to Supreme Court Rule 715, or a Kansas limited license pursuant to Supreme Court Rule 721? Yes No
	If "yes," please provide the date(s) of the application(s), whether you received the permit or license, and if you received the permit or license the current status of the permit or license.
30.	Have you ever made application to take the bar examination in a state other than Kansas? YesNo
	If "yes," give the name of the state and the date(s) of the examination(s) for which you previously applied. State the outcome of each application. For example: passed but not admitted, passed and admitted, failed, withdrew, denied for character and fitness, etc.
	If you were denied permission to take the examination for any reason, please list the reason for the denial. If denied, you must contact the jurisdiction in which the denial took place and request a certified copy of that bar application. That application must be submitted with this application in order for this application to be considered complete.

31.	Have you ever been the subject of a formal proceeding or requested to appear in person before a board of law examiners, or a representative of the board, in connection with an application filed on your behalf in any other state? Yes No
	If "yes," please list the reason the proceeding was requested, the outcome of the proceeding, and the decision made by the board or representative of the board. You must include a certified copy of the application filed in that jurisdiction and a certified copy of the transcript from the proceeding if a record was made. If the transcript from the proceeding was not transcribed, you will need to contact the court reporter directly to obtain the transcript.

32. Have you ever applied for admission to practice law, other than by examination, in a state other than Kansas? \_\_ Yes \_\_ No

If "yes," please provide the name of the state, the date(s) of the application, whether you were admitted to practice law, and if you were not admitted to practice law the reason your application was denied or withdrawn.

33.	Are you admitted in another jurisdiction or state? Yes No  The list must include the date admitted and the status of the license for each jurisdiction. If your license is "inactive," please include the reason.  Immediately following this page, attach an original certificate of good standing, original disciplinary authority certificate, and proof of compliance with continuing legal education requirements for each state admitted. CLE certificates should reflect present and past compliance. Only certificates issued within 90 days of the filing of this application will be accepted.
34.	Have you taken the Multistate Professional Responsibility Examination (MPRE)?  Yes No  If "yes", provide the date(s) of the examination(s) and your score(s) for the examination(s). If "no", provide the date you will sit for the MPRE. Make sure that you have made the proper arrangements to have your score sent to Kansas in a timely manner. Only applicants with a passing score on file with the Board are eligible to sit for examination in Kansas.
35.	Do you wish to complete the essay portion of the UBE with the use of a laptop computer.  Yes No

By selecting "yes" you are agreeing to provide a laptop which meets the specifications required by the Board's third party vendor. The Board and the vendor accept no responsibility for any malfunction of the laptop computer during the examination. It is your responsibility to ensure the laptop is in working order on examination day. You will be emailed instructions from Attorney Admissions on when and how to download the testing software. Failure to complete all of the instructions contained in the email, including downloading the program by the stated date will result in your removal from the laptop program and you be required to handwrite the written portion of the examination.

36.	Will you be transferring a Multistate Bar Examination (MBE) Score to Kansas'
	Yes No

If "yes," provide the name of the jurisdiction where you took the MBE, the date you took the MBE, whether you passed the entire bar examination in such jurisdiction, and the date you requested to have your MBE score reported to the Board, if you intend to transfer that score. All scores must be received by January 15<sup>th</sup> for the February examination and by June 15<sup>th</sup> for the July examination and must be issued by NCBE or the jurisdiction where the score was received. See Supreme Court Rule 716(e).

37. Do you have a physical disability or impairment which requires testing accommodations for taking the bar examination? \_\_ Yes \_\_ No

If testing accommodations are requested, the Board will need further information. It is the applicant's responsibility to obtain an Application for Testing Accommodations which must be submitted in addition to this application. The Application for Testing Accommodations must be filed with the Board on or before November 1 for the February examination and on or before April 1 for the July examination. The

Application for Testing Accommodations is available on the Board's web site.

- 38. Have you ever been a party to an action in divorce? \_\_\_ Yes \_\_\_ No If "yes," provide the name and address of the court of jurisdiction for each case on a separate sheet of paper. Attach a copy of each settlement agreement, divorce decree, and journal entry immediately following this page. If you were under a court-ordered obligation to pay alimony, maintenance, or child support, provide a detailed explanation regarding the status of each obligation immediately following this page. If you are delinquent on a court-ordered obligation, provide the reason for the delinquency, documentation from the court showing the amount past due, and a detailed financial plan to bring the obligation current.
- 39. Have you ever been a party to a civil law suit, **other** than an action in bankruptcy or divorce?

  \_\_\_Yes \_\_\_No

If "yes," provide the caption of the civil case, the name of the court of jurisdiction, the address of the court of jurisdiction, the case number, and a brief description of the allegations contained in each petition or complaint immediately following this page for each suit. List each suit on a separate of paper and attach a copy of the petition or complaint, the dismissal or judgment, and if you were the defendant a copy of the satisfaction of judgment for each suit.

The purpose of the following inquiries is to determine the current fitness of the applicant to practice law. The mere fact of treatment for mental health problems or addictions is not, in itself, a basis on which an applicant is ordinarily denied admission, and the Board of Law Examiners routinely certifies for admission individuals who have demonstrated personal responsibility and maturity in dealing with mental health and addiction issues.

The Board of Law Examiners does, on occasion, deny certification to applicants whose ability to function is impaired in a manner relevant to the practice of law at the time the licensing decision is made, or to applicants who demonstrate a lack of candor by their responses. This is consistent with the public purpose that underlies the licensing responsibilities assigned to bar admission agencies; further, the responsibility for demonstrating qualification to practice law is ordinarily assigned to the applicant.

The Board of Law Examiners does not, by its questions, seek information that is fairly characterized as situational counseling. Examples of situational counseling include stress counseling, domestic counseling, grief counseling, and counseling for eating or sleeping disorders. Generally, the Board of Law Examiners does not view these types of counseling as germane to the issue of whether an applicant is qualified to practice law.

40.	Do you currently have any condition or impairment (including, but not limited to, substance
	abuse, alcohol abuse, or a mental, emotional, or nervous disorder or condition) which in any
	way affects your ability to practice law in a competent and professional manner?
	Yes No

If you answer "yes" to question 40, please identify the condition or impairment, state when you first discovered the condition or impairment, and describe how it currently affects your ability to practice law.

41.	At the present time, does your personal debt exceed \$150,000, excluding real estate loans?
	Yes No

If "yes," in the space provided below, provide the name of creditor, the address of creditor, the account number, the nature of debt, the monthly payment, the current balance, and the status of account. PERSONAL DEBT INCLUDES ALL STUDENT LOANS, REGARDLESS OF THE STATUS OF THE LOAN(S).

- 42. Do you have any debts, including student loans, which are presently past due or which have been placed in collection? \_\_ Yes \_\_ No
  - If "yes," in the space provided below, provide the name of the creditor, the address of the creditor, the account number, the nature of the debt, the monthly payment, the current balance, the status of the account, and the reason the account is past due. You must also include a reasonable detailed payment plan which works in your current budget to bring the account(s) current.

43. Have you ever had a credit card revoked? Yes No

If "yes," in the space provided below, provide the name of the credit card company, the address of the credit card company, the account number, the current balance on the credit card if any, the reason the credit card was revoked, the terms of any agreement regarding the payment of the balance of the credit card, and the current status of such agreement. If additional space is needed, attach your statement immediately following this page.

44. Has a creditor ever filed suit against you? Yes No

If "yes," in the space provided below, provide the name of the creditor, the address of the creditor, the caption of the civil case, the name of the court of jurisdiction, the address of the court of jurisdiction, the case number, the amount of the original judgment if any, the current amount of the judgment if any, the terms of any agreement to pay the judgment, and the current status of such an agreement for each suit. Remember to provide information for only one suit per page. Attach a copy of the petition or complaint, a copy of the judgment, and a copy of the satisfaction of judgment.

If "yes," provide the amount of each debt discharged in bankruptcy, including the name of the creditor, the address of the creditor, the date(s) each debt was incurred, and the nature of each debt on a separate sheet immediately following this page. Additionally, provide your annual income the year you filed for bankruptcy, your annual income the year immediately preceding the bankruptcy filing, and your annual income the year immediately following the bankruptcy filing. You must attach a copy of <u>all</u> bankruptcy pleadings, including the petition, the statement of financial affairs, the schedules, any adversary proceedings, and the dismissal or the discharge order immediately following this page.

46. Have you, within the last ten (10) years, failed to timely <u>file</u> any applicable local, state, or federal income tax return, schedule, or report required by law? \_\_\_ Yes \_\_\_ No

45. Have you ever been a party to bankruptcy proceedings? Yes No

If "yes," provide the name and address of the taxing authority, the tax year(s) for which you failed to file the return, schedule, or report, and the date you finally filed the return, schedule, or report. Provide a factual statement explaining the reason(s) the taxes were not timely filed. You must attach a copy of all returns, schedules, or reports referenced in this question immediately following this page.

47. Have you, within the last ten (10) years, failed to timely **pay** any taxes owed pursuant to state or federal law? \_\_ Yes \_\_ No

If "yes," provide the name and address of the taxing authority, the tax year(s) for which you failed to pay, and the date you finally paid the taxes. If you continue to owe past due taxes, list the current balance of the taxes by tax year and by taxing authority. You must attach a copy of all tax returns, schedules, and reports. Additionally, obtain and attach a copy of a current tax statement from each taxing authority regarding each year you failed to pay your taxes. All documentation must immediately follow this page.

48. Have you, within the last ten (10) years, collected federal withholding, social security, or medicare taxes from the wages of your employees and failed to timely forward such monies to the Internal Revenue Service? Yes No

If "yes," provide the details below.

- 49. Despite whether the record has been expunged, have you ever been summoned, charged, arrested, taken into custody, or indicted for driving under the influence of alcohol or any other controlled substance? Yes No If "yes," for each incident, provide the date of the incident, the location of the incident, the investigating law enforcement agency, the name and address of the court of jurisdiction, the original charge, the ultimate conviction, the sentence imposed by the court including any educational or treatment requirements, and a factual description of the incident. For each incident, attach a copy of the arrest or police report, petition or complaint, any diversion agreement(s), the dismissal or the journal entry of conviction, and any expungement order. All additional information and documentation should immediately follow this page. List every incident on a separate sheet of paper to be followed by the appropriate documentation for each incident. All required documentation must be provided, even if an order of expungement has been entered. If you have not completed your sentence or if your crime was a felony, please read Supreme Court Rules 708 and 709 to determine if you are eligible to apply at this time.
- 50. Despite whether the record has been expunged, other than listed above, have you ever been Issued a citation, notice to appear or summons, charged, arrested, taken into custody, or indicted for any felony, misdemeanor, or infraction of the law excluding minor traffic infractions? \_\_ Yes \_\_ No If "yes," for each incident, provide the date of the incident, the location of the incident, the investigating law enforcement agency, the name and address of the court of jurisdiction, the original charge, the ultimate conviction, the sentence imposed by the court, and a factual description of the incident. For each incident, attach a copy of the arrest or police report, petition or complaint, any diversion agreement, the dismissal or the journal entry of conviction, and any expungement order. All additional information and documentation should immediately follow this page. List every incident on a separate sheet of paper to be followed by the appropriate documentation for each incident. All required documentation must be provided, even if an order of expungement has been entered. If you have not completed your sentence or if your crime was a felony, please read Supreme Court Rules 708 and 709 to determine if you are eligible to apply at this time.
- 51. Since attaining the legal driving age, has your license to operate a motor vehicle ever been suspended or revoked? \_\_ Yes \_\_ No

  If "yes," provide in the space below the name of the issuing state, the driver's license number, the dates of suspension or revocation, and the reason for the suspension(s) or revocation(s).

If you answer "yes" to question 52 through 59, attach a separate sheet immediately following this page, giving the dates and the full facts, including the disposition of each such item. In addition, attach a copy of the allegations and final disposition, if any, from the authority responsible for maintaining the record.

52.	Have you ever represented to the public or any court that you were an attorney when you were not in fact admitted to practice in that jurisdiction? Yes No
53.	Have you ever been <b>disqualified</b> from practicing law for any reason before any state or federal trial or appellate court?YesNo
54.	Have you ever been <b>disbarred</b> , <b>suspended</b> , <b>censured</b> , <b>admonished</b> , <b>or otherwise reprimanded or disqualified</b> as an attorney, as a member of another profession, or as a holder of public office? Yes No
55.	Have there ever been or are there now any charges or complaints (formal or informal) concerning your conduct as an attorney, as a member of any other profession, or as a holder of public office? Yes No
56.	Have you ever withdrawn any license application, have you ever been denied a license, or have you ever had a license revoked? Yes No
57.	Has a surety on any bond on which you were the principal been required to pay money on your behalf, or have you ever been refused a fidelity or other bond? Yes No
58.	Has any professional liability claim been asserted against you arising out of your alleged errors or omissions? Yes No
59.	Have you ever applied for (including applications that were withdrawn) or held a license for a business, trade or profession other than as an attorney at law, the procurement of which required proof of good character and/or an examination (such as certified public accountant, patent practitioner, or real estate broker)?YesNo
	If "yes," provide on a separate sheet the date for which you applied for the license, how long you held the license, the type of license, and the issuing authority (including the complete address and telephone number for the issuing authority.)

## **Continuing Obligation Oath**

## In the space provided below, copy in your handwriting the following statement:

I swear that the information provided in this application is true and correct to the best of my knowledge and ability. I acknowledge that any false, misleading, evasive, or incomplete response on the foregoing application is inconsistent with the truthfulness and candor required of a practicing attorney and is grounds for a finding that I lack the requisite character and fitness for admission to the bar in Kansas.

Should an event occur that would change my response to any question on the foregoing application, I understand that I am required to update my application in writing within 5 days of such an event. I understand that my obligation to update my application continues through the time that I am sworn in as an attorney. I further understand that if an event occurs that would change my response to any question on the foregoing application within 5 days of the time I am scheduled to be sworn in, I must update my application in writing prior to being sworn in as an attorney. Failure to update my application may result in the revocation of my license or attorney discipline. If more space is needed, continue on the back of this page.

	Signature
State of) County of)	
SUBSCRIBED AND SWORN TO b My Commission Expires:	efore me a notary public within and for said county and state.
	Notary Public
Seal or Stamp	

I specifically authorize the Board of Law Examiners or its designee(s) to obtain any information from my official record at any educational institution attended, any past or present employer, or any credit bureau, collection agency, or any loan or credit granting person or institution, which may have a bearing on my character and fitness; and I hereby consent to and authorize the release of any such information.

I hereby, without any mental reservation, state that, except as stated above, by no act or deed of mine nor by the judgment or decree of any court, nor by the act of any governmental agency, either domestic or foreign, have I forfeited or changed my citizenship and that, if admitted to practice law in the State of Kansas, I will bear true allegiance to and support and defend the Constitution of the United States and the Constitution of the State of Kansas and the laws thereof.

I fully agree that notwithstanding I am admitted to practice law in the courts of the State of Kansas by reason of this application, if it should become known hereafter that any statement herein contained is false, it shall be grounds for the Supreme Court to cancel my certificate of admission and to disbar me as an attorney at law.

I understand that I have a continuing obligation to advise the Office of Attorney Admissions of events which would change my response to any question on this application for admission.

I understand that if I pass the examination given, as a condition precedent to my admission, I shall be required to take the oath (or affirmation) required by the rules of the Court.

	Signature (Sign in Blue ink)	
STATE OF		
	ss:	
COUNTY OF		
I,	, the petitioner above named, do s	olemnly swear
that I signed the above and foregoing a therein made are true. So help me God.	pplication, that I have read the said application, and that all	statements
	Signature (SIGN IN BLUE INK)	
Subscribed and sworn to before me, a l	Notary Public in and for the above county and state, this	day
	Notary Public (SIGN IN BLUE INK)	
My commission expires:		
Note: All blanks of the notary certificate	e <u>must</u> be completed.	

I,		born at	,
	, on		(City)
(State)	(Date of	`Birth)	(Soc. Sec. No.)
as to my moral characterinformation as may be r I agree to give any furth	eter, professional reputation received, all of which will be	and fitness for the reported only to the required in referen	nsent to have an investigation made e practice of law and such other e Kansas Board of Law Examiners ce to my past record. I understand
physician, person, firm, institution having control of Law Examiners or the records, including docureports, all criminal history.	company, corporation, gove ol of any documents, records he National Conference of I ments, bar association files, tory records, and any other p	rnmental agency, post and other informates and the informates are Examiners to furmedical records and ertinent data so requ	nospital, or other medical facility lice authority, court, association or iton requested by the Kansas Board rnish to them such information of physician's reports, credit history ested, and to permit them or any others, records and other information.
record to release to the I military personnel and r	Kansas Board of Law Examir	ners any requested in s could include phot	., or other custodian of my military formation or photo copies from my copy of my DD form 214, Report
representatives, the Ka furnishing information	nnsas Board of Law Examination liability arising out of the investigation made by	ners, their agents a ne furnishing or insp	Bar Examiners, their agents and and representatives, and any party ection of such documents, records erence of Bar Examiners or by the
may be copied by the K	Kansas Board of Law Examin	ners and that said co	nt and do hereby authorize that they opies may be used and accepted as the original of this document.
I have read the foregoing of my own knowledge.	g document and have answer	ed all questions. The	e answers are complete and truthful
		Signature of Applicant (	SIGN IN BLUE INK)
		)	
COUNTY OF		)	
Subscribed and sworn to be	efore me this day o	f	· · · · · · · · · · · · · · · · · · ·
			<u></u>
My commission expires		c (SIGN IN BLUE INK)	

I,	born at,		
, <u> </u>	, on		(City)
(State)	(Date of	Birth)	(Soc. Sec. No.)
as to my moral chainformation as may be I agree to give any fu	aracter, professional reputation be received, all of which will be	and fitness for reported only to the required in refer	consent to have an investigation made the practice of law and such other the Kansas Board of Law Examiners. rence to my past record. I understand
physician, person, fin institution having co of Law Examiners of records, including do reports, all criminal l	rm, company, corporation, governments of any documents, records or the National Conference of Ecuments, bar association files, thistory records, and any other personners.	rnmental agency, and other inform Bar Examiners to medical records a crtinent data so re	n, hospital, or other medical facility, police authority, court, association or nation requested by the Kansas Board furnish to them such information or and physician's reports, credit history quested, and to permit them or any of ments, records and other information.
record to release to the military personnel ar	he Kansas Board of Law Examin	ners any requested s could include ph	Mo., or other custodian of my military information or photo copies from my oto copy of my DD form 214, Report
representatives, the furnishing information	Kansas Board of Law Examin on from liability arising out of the on or the investigation made by	ners, their agents ne furnishing or in	of Bar Examiners, their agents and and representatives, and any party espection of such documents, records, inference of Bar Examiners or by the
may be copied by th		ners and that said	nent and do hereby authorize that they copies may be used and accepted as e the original of this document.
I have read the forego of my own knowleds	C	ed all questions. T	The answers are complete and truthful
		Signature of Applicar	nt (SIGN IN BLUE INK)
27 L 77 L 0.D			
STATE OF		)	
COUNTY OF		)	
Subscribed and sworn to	to before me this day o	f	
	Notour Public	c (SIGN IN BLUE INK)	
My commission expires	Notary Public		

I,	born at,		
, <u> </u>	, on		(City)
(State)	(Date of	Birth)	(Soc. Sec. No.)
as to my moral chainformation as may be I agree to give any fu	aracter, professional reputation be received, all of which will be	and fitness for reported only to the required in refer	consent to have an investigation made the practice of law and such other the Kansas Board of Law Examiners. rence to my past record. I understand
physician, person, fin institution having co of Law Examiners of records, including do reports, all criminal l	rm, company, corporation, governments of any documents, records or the National Conference of Ecuments, bar association files, thistory records, and any other personners.	rnmental agency, and other inform Bar Examiners to medical records a crtinent data so re	n, hospital, or other medical facility, police authority, court, association or nation requested by the Kansas Board furnish to them such information or and physician's reports, credit history quested, and to permit them or any of ments, records and other information.
record to release to the military personnel ar	he Kansas Board of Law Examin	ners any requested s could include ph	Mo., or other custodian of my military information or photo copies from my oto copy of my DD form 214, Report
representatives, the furnishing information	Kansas Board of Law Examin on from liability arising out of the on or the investigation made by	ners, their agents ne furnishing or in	of Bar Examiners, their agents and and representatives, and any party espection of such documents, records, inference of Bar Examiners or by the
may be copied by th		ners and that said	nent and do hereby authorize that they copies may be used and accepted as e the original of this document.
I have read the forego of my own knowleds	C	ed all questions. T	The answers are complete and truthful
		Signature of Applicar	nt (SIGN IN BLUE INK)
27 L 77 L 0.D			
STATE OF		)	
COUNTY OF		)	
Subscribed and sworn to	to before me this day o	f	
	Notour Public	c (SIGN IN BLUE INK)	
My commission expires	Notary Public		

I,	born at,		
, <u> </u>	, on		(City)
(State)	(Date of	Birth)	(Soc. Sec. No.)
as to my moral chainformation as may be I agree to give any fu	aracter, professional reputation be received, all of which will be	and fitness for reported only to the required in refer	consent to have an investigation made the practice of law and such other the Kansas Board of Law Examiners. rence to my past record. I understand
physician, person, fin institution having co of Law Examiners of records, including do reports, all criminal l	rm, company, corporation, governments of any documents, records or the National Conference of Ecuments, bar association files, thistory records, and any other personners.	rnmental agency, and other inform Bar Examiners to medical records a crtinent data so re	n, hospital, or other medical facility, police authority, court, association or nation requested by the Kansas Board furnish to them such information or and physician's reports, credit history quested, and to permit them or any of ments, records and other information.
record to release to the military personnel ar	he Kansas Board of Law Examin	ners any requested s could include ph	Mo., or other custodian of my military information or photo copies from my oto copy of my DD form 214, Report
representatives, the furnishing information	Kansas Board of Law Examin on from liability arising out of the on or the investigation made by	ners, their agents ne furnishing or in	of Bar Examiners, their agents and and representatives, and any party espection of such documents, records, inference of Bar Examiners or by the
may be copied by th		ners and that said	nent and do hereby authorize that they copies may be used and accepted as e the original of this document.
I have read the forego of my own knowleds	C	ed all questions. T	The answers are complete and truthful
		Signature of Applicar	nt (SIGN IN BLUE INK)
27 L 77 L 0.D			
STATE OF		)	
COUNTY OF		)	
Subscribed and sworn to	to before me this day o	f	
	Notour Public	c (SIGN IN BLUE INK)	
My commission expires	Notary Public		

Fill this form out completely and tape one photo in the space indicated below. Place your signature on the back of the photo as well as on the single signature line located below the information box on the photo identification sheet. The signature lines on the bottom of the sheet will be completed at the examination. DO NOT COMPLETE THAT PORTION OF THE SHEET.

Exam Date:	(Month)	(Year)	DOCKET #Assigned by KLBE
		Please fill out this portion - Must be t	yped
PLACE YOUR PHOTO		FULL LEGAL NAME	
HERE		STREET ADDRES	SS
		CITY STATE	ZIP CODE
		SOCIAL SECURITY NUMBER	DATE OF BIRTH
		DRIVER'S LICENSE NUMBER	R AND STATE
S	Signa	iture:	
	FOR OF	FICE USE ONLY	
Signature: _			

Signature:

Signature:

# CERTIFICATE OF CHARACTER AND FITNESS

Affiants must have known the applicant for a period of not less than <u>4 years</u>. (Relatives, fellow law students and law professors are not acceptable as affiants)

# This form is to be completed by the affiant and returned to the <u>applicant</u> after completion.

Jama of Attacting Party			
Name of Attesting PartyResidence Address			
Street	City	State	Zip
Phone No. ()	<u>-</u>		-
How long have you known the applicant	?		
What relationships (such as employer, so with the applicant which have aided you		haracte	er?
Are you personally acquainted with any	of the applicant's other social or bu	siness	associa
f so, state their reputation in the commu	unity in which they reside and work	•	
tate the applicant's reputation for:			
a) reliability			
b) integrity			
c) industry			
a) initiative			
e) sense of honor			
f) morality			
g) uumumess			
h) trustworthiness			
·			
h) trustworthiness			
h) trustworthiness  To your knowledge has the applicant even a) Arrested	er been:	Yes	<u>No</u>
h) trustworthiness  To your knowledge has the applicant even a) Arrested b) Expelled, suspended or asked to resi	er been:	Yes	<u>No</u>
h) trustworthiness  To your knowledge has the applicant even a) Arrested	er been:  ign from any educational institution tution	Yes	<u>No</u>
h) trustworthiness  To your knowledge has the applicant ever a) Arrested b) Expelled, suspended or asked to resi c) Disciplined by any educational instit d) A party to legal proceedings against e) Addicted to the use of narcotics or in	er been: ign from any educational institution tution him/her	Yes	<u>No</u>
h) trustworthiness  To your knowledge has the applicant ever a) Arrested b) Expelled, suspended or asked to resi c) Disciplined by any educational instit d) A party to legal proceedings against	er been:  ign from any educational institution tution him/her ntoxicating liquors within	Yes	<u>No</u>

7. Does the applicant, in your opinion, possess the high standard of good moral character and general fitness required for admission to the practice of law? If your answer is negative, explain in detail.
8. If any of the above information is from sources other than personal knowledge, please state the source:
9. Are you aware of any significant facts concerning the applicant's background which would reflect favorably or unfavorably on the applicant's character and fitness to practice law?
10. Do you unqualifiedly recommend the applicant for admission to the practice of law in Kansas?
11. If you desire, please expand upon any of the foregoing answers or add any comments or information which you believe will aid the Kansas Board of Law Examiners to pass upon the qualifications of applicants for admission to the practice of law in Kansas. For such purpose you may supplement this certificate by a letter in informal narrative form, to be attached hereto.
I certify the foregoing information furnished above is given with the understanding that it will be utilized for purposes of determining the applicant's general fitness for admission to the Bar of Kansas and is true and correct to the best of my knowledge and belief. Where I have relied upon other sources of information, they are only those which I believe to be accurate and reliable.
Date Signature of Attesting Party (SIGN IN BLUE INK)
State ofss:
County of
Subscribed and sworn to before me, a Notary Public in and for the above county and state, this day of
Notary Public (SIGN IN BLUE INK)
My commission expires (Seal)
Note: All blanks of the notary certificate <u>must</u> be completed.

# CERTIFICATE OF CHARACTER AND FITNESS

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# This form is to be completed by the affiant and returned to the <u>applicant</u> after completion.

Jama of Attacting Party			
Name of Attesting PartyResidence Address			
Street	City	State	Zip
Phone No. ()	<u>-</u>		-
How long have you known the applicant	?		
What relationships (such as employer, so with the applicant which have aided you		haracte	er?
Are you personally acquainted with any	of the applicant's other social or bu	siness	associa
f so, state their reputation in the commu	unity in which they reside and work	•	
tate the applicant's reputation for:			
a) reliability			
b) integrity			
c) industry			
a) initiative			
e) sense of honor			
f) morality			
g) uumumess			
h) trustworthiness			
·			
h) trustworthiness			
h) trustworthiness  To your knowledge has the applicant even a) Arrested	er been:	Yes	<u>No</u>
h) trustworthiness  To your knowledge has the applicant even a) Arrested b) Expelled, suspended or asked to resi	er been:	Yes	<u>No</u>
h) trustworthiness  To your knowledge has the applicant even a) Arrested	er been:  ign from any educational institution tution	Yes	<u>No</u>
h) trustworthiness  To your knowledge has the applicant ever a) Arrested b) Expelled, suspended or asked to resi c) Disciplined by any educational instit d) A party to legal proceedings against e) Addicted to the use of narcotics or in	er been: ign from any educational institution tution him/her	Yes	<u>No</u>
h) trustworthiness  To your knowledge has the applicant ever a) Arrested b) Expelled, suspended or asked to resi c) Disciplined by any educational instit d) A party to legal proceedings against	er been:  ign from any educational institution tution him/her ntoxicating liquors within	Yes	<u>No</u>

general fitness required for admission to the prain detail.	actice of law? If your answer is negative, explain
8. If any of the above information is from sour the source:	rces other than personal knowledge, please state
9. Are you aware of any significant facts conc reflect favorably or unfavorably on the applicar	erning the applicant's background which would nt's character and fitness to practice law?
10. Do you unqualifiedly recommend the appl Kansas?	licant for admission to the practice of law in
11. If you desire, please expand upon any of the information which you believe will aid the Kan qualifications of applicants for admission to the may supplement this certificate by a letter in interest.	nsas Board of Law Examiners to pass upon the e practice of law in Kansas. For such purpose you
will be utilized for purposes of determining	d above is given with the understanding that it the applicant's general fitness for admission to the best of my knowledge and belief. Where I on, they are only those which I believe to be
Date	Signature of Attesting Party (SIGN IN BLUE INK)
State of	ss:
County of	
My commission expires	Notary Public (SIGN IN BLUE INK)
Note: All blanks of the notary certificate must be com	ipleted.

# CERTIFICATE OF CHARACTER AND FITNESS

Affiants must have known the applicant for a period of not less than <u>4 years</u>. (Relatives, fellow law students and law professors are not acceptable as affiants)

# This form is to be completed by the affiant and returned to the <u>applicant</u> after completion.

E(	OR ADMISSION TO THE BAR OF KANSAS		
	Name of Attesting Party		
	Residence Address		
	Street         City           Phone No. ()         Occupation	State	•
2.	How long have you known the applicant?		
3.	What relationships (such as employer, social friend, co-worker, and the like) with the applicant which have aided you in forming any opinion of his/her cl		•
4.	Are you personally acquainted with any of the applicant's other social or bu		
	If so, state their reputation in the community in which they reside and work.		
5	State the applicant's reputation for:		
۶.	State the applicant's reputation for:		
	(a) reliability		
	(b) integrity		
	(c) industry		
	(d) initiative		
	(e) sense of honor		
	(f) morality		
	(g) truthfulness		
	(h) trustworthiness		
5	To your knowledge has the applicant ever been	Vec	No
ó.	To your knowledge has the applicant ever been:	Yes	No
5.	(a) Arrested		
5.	<ul><li>(a) Arrested</li><li>(b) Expelled, suspended or asked to resign from any educational institution</li></ul>		
6.	<ul><li>(a) Arrested</li></ul>		
6.	<ul> <li>(a) Arrested</li></ul>		
6.	<ul> <li>(a) Arrested</li></ul>		
5.	<ul> <li>(a) Arrested</li></ul>		

7. Does the applicant, in your opinion, possess the high standard of good moral character and general fitness required for admission to the practice of law? If your answer is negative, explain in detail.
8. If any of the above information is from sources other than personal knowledge, please state the source:
9. Are you aware of any significant facts concerning the applicant's background which would reflect favorably or unfavorably on the applicant's character and fitness to practice law?
10. Do you unqualifiedly recommend the applicant for admission to the practice of law in Kansas?
11. If you desire, please expand upon any of the foregoing answers or add any comments or information which you believe will aid the Kansas Board of Law Examiners to pass upon the qualifications of applicants for admission to the practice of law in Kansas. For such purpose you may supplement this certificate by a letter in informal narrative form, to be attached hereto.
I certify the foregoing information furnished above is given with the understanding that it will be utilized for purposes of determining the applicant's general fitness for admission to the Bar of Kansas and is true and correct to the best of my knowledge and belief. Where I have relied upon other sources of information, they are only those which I believe to be accurate and reliable.
Date Signature of Attesting Party (SIGN IN BLUE INK)
State of
County of
Subscribed and sworn to before me, a Notary Public in and for the above county and state, this day of
Notary Public (SIGN IN BLUE INK)
My commission expires
(Seal)  Note: All blanks of the notary certificate must be completed.

# Office of Attorney Admissions

Kansas Judicial Center, First Floor, 301 SW 10th Avenue, Topeka, Kansas 66612

To: Kansas Bar Applicant

**Re:** Fingerprint Instructions

The rules for admission to Kansas are:

Supreme Court Rule 716 – By written examination
Supreme Court Rule 717 – Uniform Bar Examination (UBE) score transfer
Supreme Court Rule 719 – Without written examination
Supreme Court Rule 720 – Temporary restricted license – military spouse
Supreme Court Rule 721 – Restricted license – single employer

- 1. Download this PDF.
- 2. Read the Waiver Agreement and FBI Privacy Act Statement.
- 3. Fill out the form located on page 3 of the Waiver Agreement and FBI Privacy Act Statement.
  - a. Do not fill out the portion to be completed by the fingerprinting official.
  - b. Print a copy to be filled out by the fingerprinting official.
- 4. The finger printing agency can use the provided card or their own.
  - a. Ensure the official signs their name in the appropriate box.
  - b. Ensure the date (left of official's signature box) reflects the date of fingerprinting.
  - c. Mail a physical copy of the fingerprint card printed on card stock to the Board.
- 5. Supply the printing official with a 9x12 envelope, addressed to:

Kansas Board of Law Examiners 301 SW 10th Avenue, First Floor Topeka, Kansas 66612

- 6. Ensure the fingerprinting official places both waivers and the fingerprint card in the envelope and seals the envelope, place their signature or initials over the seal.
  - a. The "Fingerprint Card Waiver" needs to be filled out, signed and notarized.
  - b. Any fingerprint card received by the KBLE that is not sealed will be rejected.
- 7. The sealed envelope may be sent with your application or separately.
  - a. Records checks will only be performed after we receive your application.
  - b. KBI will reject any fingerprints over 1 year old.
- \*All steps may be completed at the fingerprinting agency, granted they allow it. The applicant is responsible for all fees required of them by the fingerprinting agency. Please email our office at admissions@kscourts.org.

Amanda Kohlman Attorney Admissions Program Manager

# WAIVER AGREEMENT AND FBI PRIVACY ACT STATEMENT

## Fingerprint-Based Record Checks for Noncriminal Justice Purposes

I understand that, upon my request, the Authorized Recipient will provide me a copy of the criminal history background report, received on me, for the purpose of challenging the accuracy and completeness of any information contained in any such report. I may be afforded a reasonable amount of time to correct or complete the criminal history record (or decline to do so) before the Authorized Recipient makes a final decision about my status as an employee, volunteer or contractor, or my eligibility for any pertinent license, certification or registration, or adoption. See 28 CFR 50.12(b).

I understand that officials receiving the results of the criminal history record check are to use those results only for authorized purposes and are prohibited from retaining or disseminating such results in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council. See 5 United States Code (U.S.C.) 552a(b); 28 U.S.C. 534(b);34 U.S.C. 40316, Article IV(c); 28 CFR 20.21(c), 20.33(d), 906.2(d); and 2022Kansas Laws Ch. 92, § 1 (Senate Sub. for H.B. 2495).

I understand that my fingerprints will be retained by the KBI and/or the Federal Bureau of Investigation if the Authorized Recipient participates in the state or national Rap Back program for continued suitability for being an employee, volunteer or contractor, or eligibility for any license, certification, registration, or adoption. The Rap Back program will notify the Authorized Recipient when there are updates to my criminal history record. Once I am no longer employed, a volunteer contractor, licensed, certified, registered, or seeking adoption, the Authorized Recipient shall request my fingerprints be removed from the state and/or national Rap Back program.

### FBI PRIVACY ACT STATEMENT

### **Authority:**

The FBI's acquisition, preservation, and exchange of identification records and information requested by this form is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include numerous federal statutes, hundreds of state statutes pursuant to Pub. L. 92-544, Presidential executive orders, regulations and/or orders of the Attorney General of the United States, or other authorized authorities. Examples include, but are not limited to: 5 U.S.C. 9101; Pub. L. 94-29; Pub. L. 101-604; and Executive Orders 10450 and 12968. Providing the requested information is voluntary; however, failure to furnish the information may affect timely completion or approval of your application.

### Social Security Account Number (SSAN).

Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 U.S.C. 552a), the Authorized Recipient is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also requires federal agencies to use this number to help identify individuals in agency records.

### **Principal Purpose:**

Certain determinations, such as employment, security, licensing, and adoption, may be predicated on fingerprint-based checks. Your fingerprints and other information contained on (and along with) this form may be submitted to the requesting agency, the agency conducting the application investigation, and/or FBI for the purpose of comparing the submitted

# WAIVER AGREEMENT AND FBI PRIVACY ACT STATEMENT (Cont.)

information to available records in order to identify other information that may be pertinent to the application. During the processing of this application, and for as long hereafter as may be relevant to the activity for which this application is being submitted, the FBI may disclose any potentially pertinent information to the requesting agency and/or to the agency conducting the investigation. The FBI may also retain the submitted information in the FBI's permanent collection of fingerprints and related information, where it will be subject to comparisons against other submissions received by the FBI. Depending on the nature of your application, the requesting agency and/or the agency conducting the application investigation may also retain the fingerprints and other submitted information for other authorized purposes of such agency(ies).

### **Routine Uses:**

The fingerprints and information reported on this form may be disclosed pursuant to your consent, and may also be disclosed by the FBI without your consent as permitted by the Federal Privacy Act of 1974 (5 U.S.C. 552a(b)) and all applicable routine uses as may be published at any time in the Federal Register, including the routine uses for the FBI Fingerprint Identification Records System (Justice/FBI-009) and the FBI's Blanket Routine Uses (Justice/FBI-BRU). Routine uses include, but are not limited to, disclosures to: appropriate governmental authorities responsible for civil or criminal law enforcement, counterintelligence, national security or public safety matters to which the information may be relevant; to State and local governmental agencies and nongovernmental entities for application processing as authorized by Federal and State legislation, executive order, or regulation, including employment, security, licensing, and adoption checks; and as otherwise authorized by law, treaty, executive order, regulation, or other lawful authority. If other agencies are involved in processing this application, they may have additional routine uses.

### **Additional Information:**

The requesting agency and/or the agency conducting the application-investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any system(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).

# RIGHT TO OBTAIN AND CHALLENGE ACCURACY OF CRIMINAL HISTORY RECORDS

You may request a copy of your state and/or national criminal history record from the Authorized Recipient for the purpose of challenging for accuracy and completeness at no cost.

### To Challenge Your Kansas Criminal History Record Information (CHRI)

You may also obtain a copy of your Kansas CHRI to review for accuracy and completeness, by submitting a set of your fingerprints, a letter requesting your criminal history record, and payment of the appropriate fee to the KBI. If a change is made to your Kansas criminal history record due to a challenge, a new copy of your Kansas criminal history record will be sent to the Authorized Recipient to make a final decision about your status as an employee, volunteer or contractor, or your eligibility for any pertinent license, certification or registration, or adoption.

For further details, including the current fee, visit the following Internet website: <a href="http://www.kansas.gov/kbi/info/info\_brochures.shtml">http://www.kansas.gov/kbi/info/info\_brochures.shtml</a> then find the brochure named "Record Checks for Non-Criminal Justice Purposes".

### To Challenge Your National Criminal History Record Information (CHRI)

To obtain a copy of your national CHRI, also known as the Identity History Summary, for review and challenge you must submit a set of your fingerprints and the appropriate fee to the FBI. The FBI will forward your challenge to the appropriate contributing agency to verify or correct the entry. Upon receipt of an official communication directly from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency (see 28 CFR 16.30 through 16.34).

Information regarding this process may be obtained at: <a href="https://www.fbi.gov/services/cjis/identity-history-summary-checks">https://www.fbi.gov/services/cjis/identity-history-summary-checks</a>.

### DO NOT SEND THIS FORM TO THE FBI

# WAIVER AGREEMENT AND FBI PRIVACY ACT STATEMENT (Cont.)

I have OR have not been	convicted of a crime					
If convicted, describe the crime(s), the	ne date and location of	f the crime(s), ar	nd the name of	f the convicting court:		
_						
Under penalty of perjury, I hereby destatement constitutes a severity level				nderstand that any falsificat	ion of this	
I have been provided the Waiver A criminal records for accuracy and con		acy Act Statem	ent, and infor	rmation about how to cha	llenge my	
Signature	Date					
Printed Name		Date of Birth				
Residential Address	City	Sta	ate	Zip		
TO BE CO	OMPLETED BY T	HE FINGERI	PRINTING .	AGENCY:		
Method of Verifying Identit		rer's License tary ID Card	State Is	sued ID Card		
State/Branch:	II	D Number:				
Agency Name:						
Address:						
Telephone:		Fax:				
Name of Individual Verifying Identit	y:					
APPLICA	NT: Please retur	n all pages to	the Authori	zed Recipient		
AUTHORIZED RECI		t maintain the t provide a cop			tain.	

DO NOT SEND THIS FORM TO THE FBI

# Fingerprint Card Waiver

I,, do hereby acknowledge							
that the fingerprint card which I am submitting to the Kansas Board of Law							
Examiners will be sent to the Kansas Bureau of Investigation and the Federal Bureau							
of Investigation for the sole purpose of investigating my character and fitness with							
regard to admission to the Kansas Bar. I understand that any information obtained will be used by the Board of Law Examiners or the Disciplinary Administrator's							
							Office when investigating my character and fitness.
I further understand that any obtained information may be sent to other investigating							
jurisdictions and agencies if applicant executes a proper authorization and release.							
Signature of Applicant:							
SIGN IN BLUE INK							
State of)							
)							
County of)							
Subscribed and sworn to before me this day of, 20							
Notary Public							
My Commission expires							
(Affix Seal or Stamp Here)							
0.611.4							

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# FEDERAL BUREAU OF INVESTIGATION UNITED STATES DEPARTMENT OF JUSTICE

CJIS DIVISION/CLARKSBURG, WV 26306

1. LOOP

# **APPLICANT**

### THIS CARD FOR USE BY:

- 1. LAW ENFORCEMENT AGENCIES IN FINGERPRINTING APPLICANTS FOR LAW ENFORCEMENT POSITIONS.\*
- 2. OFFICIALS OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT, LICENSING, AND PERMITS, AS AUTHORIZED BY STATE STATUTES AND APPROVED BY THE ATTORNEY GENERAL OF THE

UNITED STATES. LOCAL AND COUNTY ORDINANCES. UNLESS SPECIFICALLY BASED ON APPLICABLE STATE STATUTES DO NOT SATISFY THIS REQUIREMENT.\*

- 3. U.S. GOVERNMENT AGENCIES AND OTHER ENTITIES REQUIRED BY FEDERAL LAW.\*\*
- 4. OFFICIALS OF FEDERALLY CHARTERED OR INSURED BANKING INSTITUTIONS TO PROMOTE OR MAINTAIN

THE SECURITY OF THOSE INSTITUTIONS

Please review this helpful information to aid in the successful processing of hard copy civil fingerprint submissions in order to prevent delays or rejections. Hard copy fingerprint submissions must meet specific criteria for processing by the Federal Bureau of Investigation.

Ensure all information is typed or legibly printed using blue or black ink.

Enter data within the boundaries of the designated field or block.

Complete all required fields. (If a required field is left blank, the fingerprint card may be immediately rejected without further processing.)

The required fields for hard copy civil fingerprint cards are: ORI, Date of Birth, Place of Birth, NAM, Sex, Date fingerprinted, Reason Fingerprinted, and proper completion of fingerprint impression boxes.

Do not use highlighters on fingerprint cards. Do not enter data or labels within 'Leave Blank' areas. Ensure fingerprint impressions are rolled completely from nail to nail. Ensure fingerprint impressions are in the correct sequence. Ensure notations are made for any missing fingerprint impression (i.e. amputation). De not use more than two retabls per fingerprint impression block. Ensure no stray marks are tabls the fingerprint impression blocks.

Training aids can be ordered online via the Internet by accessing the FBI's website at: fbi.gov, click on 'Fingerprints', then click on 'Ordering Fingerprint Cards & Training Aids'. Direct questions to the Biometric Services Section's Customer Service Group at (304) 625-5590 or by e-

Social Security Account Number (SSAN): Pursuant to the Privacy Act of 1974, any Federal, state, or local government agency that requests an individual to disclose his or her SSAN, is responsible for informing the person whether disclosure is mandatory or voluntary, by what statutory or other authority the SSAN is solicited, and what uses will be made of it. In is instance, the SSAN is solicited pursuant to 28 U.S.C 534 and will be used as a unique identifier to confirm your identity because many people have the same name and date of birth. Disclosure of your SSAN is voluntary; however, failure to disclose your SSAN may affect completion or approval of your application.

#### PRIVACY ACT STATEMENT

mail at <identity@fbi.gov>.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub.L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBIs Next Generation identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprints repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI

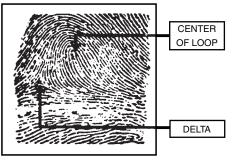
Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/ biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

### PAPERWORK REDUCTION ACT NOTICE

According to the Paperwork Reduction Act of 1995, no persons are required to provide the information requested unless a valid OMB control number is displayed. The valid OMB control number for this information collected is 1110-0046. The time required to complete this information collected is estimated to be 10 minutes, including time reviewing instructions, gathering, completing, reviewing and submitting the information collection. If you have any comments concerning the accuracy of this time estimate or suggestions for reducing this burden, please send to: Department Clearance Officer, United States Department of Justice, Justice Management Division, Policy and Planning Staff, Washington, DC 20530.

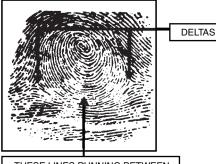
#### INSTRUCTIONS:

- \* 1. PRINTS MUST GENERALLY BE CHECKED THROUGH THE APPROPRIATE STATE IDENTIFICATION BUREAU, AND ONLY THOSE FINGERPRINTS FOR WHICH NO DISQUALIFYING RECORD HAS BEEN FOUND LOCALLY SHOULD BE SUBMITTED FOR FBI SEARCH.
- IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN IN SPACE "EMPLOYER AND ADDRESS". THE CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI. UNIVERSAL CONTROL NUMBER, IF KNOWN, SHOULD ALWAYS BE FURNISHED IN THE APPROPRIATE SPACE.
- \*\* 3. MISCELLANEOUS NO. RECORD: OTHER ARMED FORCES NO. PASSPORT NO. [FP], ALIEN REGISTRATION NO. (AR), PORT SECURITY CARD NO. (PS), SELECTIVE SERVICE NO. (SS) VETERANS' ADMINISTRATION CLAIM NO. (VA).



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### 3. A RCH



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FD-258 (REV. 5-15-17)