## **MBE Score Transfer Form**

This form is to be utilized only if the jurisdiction where you took the MBE does not utilize the NCBE Score Transfer Service.

An MBE score certification will not be accepted directly from an applicant.

## Criteria for Transfer

MBE scores may be transferred to Florida if the following criteria are met:

- The MBE score was a scaled score of 136.0 or greater.
- The MBE score was attained within 25 months of passing Part A of the General Bar Examination and the MPRE or within 25 months of the date you anticipate taking those portions of the examination.

If the NCBE provides the service of transferring MBE scores for the state in which you took the examination, you must use the NCBE Score Transfer Service. A list of jurisdictions for which the NCBE provides this service can be found at <a href="https://www.ncbex.org/ncbe-exam-score-services/mbe-score-services">www.ncbex.org/ncbe-exam-score-services/mbe-score-services</a>. If the jurisdiction is listed on that website, follow the steps indicated to transfer your MBE score to Florida in lieu of using this form.

If the required jurisdiction is not listed, you must contact that jurisdiction directly, and utilize this form to affect the transfer of your MBE score. Since rules and policies of jurisdictions change, you are strongly advised to consult all jurisdictions directly for the most accurate and current information for completing this process, including any required fees.

To Be Completed by Applicant		
Applicant Name	hereby authorize	Board of Bar Examiner
''		
to release to the Florida Board of Bar Examin	ers my MULTISTATE BAR EXAMINA	TION SCORE that I attained on
the Bar Examination administered in,	Year . I am enclosing the requ	uisite fee, if applicable. My
date of birth isand the last four d	igits of my Social Security Number are	e
State of County of	Signature of	f Applicant
Sworn to and subscribed to me this day o		
	Check one: Personally k	Known OR Produced ID
Signature and Seal of Notary Public		
Name of Notary Public (typed, printed, or stamped)	Type of Identifi	ication Produced
*****Applicar	nts should not type or write below t	his line.******
To Be Completed by Admissions Agen	cy	
o the Florida Board of Bar Examiners:		
certify the applicant named above attained a scaled score of on t		e Multistate Bar Examination;
administered in the jurisdiction of	in	(MM/YY).
Signature of Certifying Official	Title of Certify	ving Official Date Signed

This form must be received by FBBE directly from the certifying agency no later than <u>January 15</u> for the February General Bar Examination or <u>June 15</u> for the July General Bar Examination.

Mail to: Florida Board of Bar Examiners 1891 Eider Court

Tallahassee, FL 32399-1750