

Florida Board of Bar Examiners

ADMINISTRATIVE BOARD OF THE SUPREME COURT OF FLORIDA
1891 Eider Court, Tallahassee, FL 32399-1750



CERTIFICATE OF DEAN OF LAW SCHOOL

FOR COMPLETION BY THE APPLICANT

Instructions to Applicant: Please clearly print the information requested in this section and forward the form to your law school Dean, or other appropriate official, for completion as soon as possible after conferral of your J.D. degree. For Item B. below, write "N/A" if you have not yet filed your application for admission to The Florida Bar.

- A. Applicant Name: _____
- B. Applicant File Number: _____
- C. Social Security Number: _____
- D. Name of Law School: _____

FOR COMPLETION BY LAW SCHOOL DEAN

Instructions to Law School Dean: Please complete this section, attach a copy of the applicant's final law school transcript, and forward both documents directly to the Florida Board of Bar Examiners at the address above. Please include any explanatory comments on reverse. The Board sincerely appreciates your cooperation in completing this form.

I certify that the information set out below regarding the above-named applicant is true and correct to the best of my knowledge.

- A. Date applicant entered law school: _____
- B. Date J.D. degree conferred: _____
- C. LSAT score (if applicable): _____
- D. GRE score (if applicable): _____
- E. Average law school grade: _____
- F. Final class rank: _____
- G. It is probable that the degree was awarded after the administration of the bar examination; therefore, I am advising that this applicant completed requirements for graduation on _____ (date).
- H. From the records in your office, or from your personal knowledge, please check "yes" or "no" below. If your answer to any is "no," provide a short summary of details on reverse.

- | | | |
|------------------------------|-----------------------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | 1. Is the applicant honest? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | 2. Is the applicant thorough in fulfilling obligations? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | 3. Does the applicant meet deadlines? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | 4. Does the applicant treat others with civility? |

I. Please check "yes" or "no" below. If your answer to any is "yes," provide a short summary of details below. In responding to Item 1., you are requested to disclose any pertinent information regardless of final disposition and regardless of formal or informal expunction of such information. To your knowledge, or do records in your office reflect that the applicant:

- ☐ Yes ☐ No 1. has ever been accused of a violation of the honor code or student conduct code, warned, placed on scholastic or disciplinary probation, suspended, requested or advised to discontinue studies, dropped, expelled, or requested to resign, or otherwise subjected to discipline for academic or personal conduct reasons by any educational institution?
- ☐ Yes ☐ No 2. has ever been a party to legal or administrative proceedings?
- ☐ Yes ☐ No 3. has ever violated a court order?
- ☐ Yes ☐ No 4. has ever been charged with, arrested or cited for any violation of a law or an ordinance?
- ☐ Yes ☐ No 5. has ever been accused of a violation of trust?
- ☐ Yes ☐ No 6. has ever been denied admission to the Bar of any other state?
- ☐ Yes ☐ No 7. has had a pattern of unexcused absences from school or work?
- ☐ Yes ☐ No 8. has ever been dismissed or asked to resign from any employment?
- ☐ Yes ☐ No 9. within the past 5 years, has been treated for, or experienced a recurrence of, schizophrenia or any other psychotic disorder, a bipolar disorder, or major depressive disorder, that has impaired or could impair the ability to practice law?
- ☐ Yes ☐ No 10. within the last 5 years, has been treated for, or had a recurrence of, a substance-related disorder that has impaired or could impair or limit the ability to practice law?
- ☐ Yes ☐ No 11. has ever been delinquent in any financial obligations?

J. Comments:

Name Printed: _____

Title: _____

Signature: _____

Date: _____