



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

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**FORM A
PETITION FOR TESTING ACCOMMODATIONS**

All original documents must be filed with the Office of Admissions' San Francisco Office.
(Must be completed by the applicant; please type or print legibly)

I. BACKGROUND INFORMATION

1. Full Name:

First _____ Middle _____ Last _____

Date of Birth: _____ File Number*: _____

(*You must be registered as a student or attorney with the Committee of Bar Examiners before filing a petition for testing accommodations.)

2. I intend to take the following examination:

- First-Year Law Students' Examination (FYLSX)
- California Bar Examination (CBX)

3. Date of examination I intend to take:

_____ Month/Year

4. Have you previously taken the California Bar Examination or First-Year Law Student's Examination?

- YES
- NO

If yes, which examination(s) (list all examinations taken):

_____ Month/Year

5. If yes, did you request testing accommodations to take the examination(s)?

- YES
- NO

II. DISABILITY STATUS

1. Check the disability or disabilities for which you are requesting accommodations:

- | | |
|--|--|
| <input type="checkbox"/> Visual impairment | <input type="checkbox"/> Specific learning disorder/disability |
| <input type="checkbox"/> Hearing impairment | <input type="checkbox"/> ADHD |
| <input type="checkbox"/> Other physical disability (specify):
<hr/> | <input type="checkbox"/> Psychological disability |
| | <input type="checkbox"/> Other disability (specify):
<hr/> |

2. Narrative Description (**REQUIRED**)

Attach a narrative description of the nature and extent of your specific disability or disabilities, when and how it/they were first identified, and how it/they affect your daily life. Please describe the functional limitations related to your disability that directly affect your ability to take the examination.

3. When did you first acquire the disability (approximate date and age)?

4. Who was the medical professional (name, occupation, and specialty) who first diagnosed your disability?

5. When was the disability first diagnosed by a treating professional (date and age)?

6. Are you currently being treated: YES NO

If yes, provide the name, qualifications and contact number of your current treating professional.

7. What treatment and/or medication are currently being prescribed?

8. Are you taking the treatment and/or medication as prescribed? YES NO
TA-FormA.0417

9. Are the treatment and/or medication effective in addressing or controlling your symptoms?

YES NO N/A

If no, explain why not.

III. PAST ACCOMMODATIONS

1. Did you receive disabled-student services, tutoring services, and/or testing accommodations in elementary, middle school or junior high school and/or high school?

YES NO

If yes, provide the name of the school(s) and years attended, and attach any written documentation of accommodations granted and/or documentation of other services received.

What was your disability? _____

What accommodations did you receive?

2. Did you receive disabled-student services, tutoring services and/or testing accommodations in college?

YES NO

If yes, provide the name of the school(s) and years attended, and attach any written documentation of accommodations granted and/or documentation of other services received.

What was your disability? _____

What accommodations did you receive?

3. Did you request testing accommodations in law school?

YES NO

If yes, were they granted? YES NO

If granted, in addition to responding to the following questions, you must submit a completed law school verification form (**Form F**) from each law school you attended, which must be signed by an official law school representative.

What was your disability? _____

What accommodations did you receive?

If your request was denied, or only partially granted, please explain:

4. Did you request accommodations to take the LSAT?

YES NO

If yes, attach a copy of the letter you received from LSAC detailing the results of your request(s) for testing accommodations for each administration of the LSAT you took.

What was your disability? _____

What accommodations did you receive?

If your request was denied, or only partially granted, please explain:

5. Did you request accommodations to take the Multistate Professional Responsibility Examination (MPRE)?

YES NO

If yes, attach a copy of the letter you received from NCBE/ACT/LSAC detailing the results of your request(s) for testing accommodations for each administration of the MPRE you took.

What was your disability? _____

What accommodations did you receive?

If your request was denied, or only partially granted, please explain:

6. When applying for another jurisdiction's bar examination, did you request testing accommodations?

YES NO

If yes, in addition to responding to the following questions, you must submit a completed Other Jurisdiction's Testing Accommodations Verification form (**Form G**) from each state from which you requested testing accommodations, which must be signed by an official from the bar admission office administering the bar examination in that state.

What was your disability? _____

What accommodations did you receive?

If your request was denied, or only partially granted, please explain:

IV.ACCOMMODATIONS REQUESTED FOR THE CALIFORNIA BAR EXAMINATION OR FIRST-YEAR LAW STUDENTS' EXAMINATION (check all that apply)

FORMAT

The California Bar Examination is a timed examination administered over two days, consisting of a 3-hour morning session (9:00 a.m. to 12:00 noon) and a 3½-hour afternoon session (2:00 p.m. to 5:30 p.m.) on the first day, and two 3-hour sessions (9:00 a.m. to 12:00 noon and 2:00 p.m. to 5:00 p.m.) on the second day. The examination is scheduled twice each year. There is a lunch break from 12:00 noon to 1:30 p.m. each day. The examination is administered in a proctored setting.

The first day consists of three one-hour essay questions in the morning session and two one-hour essay questions plus one 90-minute Performance Test question in the afternoon session. The written portions of the examination are designed to assess, among other things, the applicant's ability to communicate his/her analysis effectively in writing. Applicants may use their personal laptop computers to type their answers, or they may handwrite their answers. The second day consists of 200 multiple-choice questions (Multistate Bar Examination or "MBE"), with 100 questions administered in the morning session and 100 questions in the afternoon session. Applicants record their answers by darkening circles using a Number 2 pencil on an answer sheet that is scanned by a computer to grade the examination.

The First-Year Law Students' Examination is a one-day timed examination administered in two sessions, a four-hour morning session from 8:00 a.m. to 12:00 noon and a three-hour afternoon session from 2:00 p.m. to 5:00 p.m. The examination is scheduled twice each year. There is a lunch break from 12:00 noon to 1:30 p.m. The examination is administered in a proctored setting.

The morning session consists of four one-hour essay questions. The essay questions are designed to assess, among other things, the applicant's ability to communicate his/her analysis effectively in writing. Applicants may use their personal laptop computers to type their answers, or they may handwrite their answers. The afternoon session consists of 100 multiple-choice questions. Applicants record their answers by darkening circles using a Number 2 pencil on an answer sheet that is scanned by a computer to grade the examination.

SETTING

Applicants are assigned seats, two per six-foot table, in a room set for as few as 100 to 400 applicants for the First-Year Law Students' Examination to as many as 1,500 applicants for the California Bar Examination. Applicants are not allowed to bring food, beverages, or certain other items into the testing room unless approved as accommodations. All applicants may bring prescription medication. The examination

is administered in a quiet environment, and applicants are allowed to use small foam earplugs. They may leave the examination room only to use the restroom or drinking fountain, within the time allotted for the test session.

Taking into consideration this description of the examination and the functional limitations that you currently experience, what testing accommodation (or accommodations, if more than one would be appropriate) are you requesting?

Alternative Formats

- Audio CD version of the examination
- Electronic versions of the Essay and/or Performance Test questions in Microsoft Word format on CDs for use with screen-reading software
- Other: _____

Personal Assistance

- Dictate to a typist (for written sessions)
- Reader
- Assistance with multiple-choice answer sheet (Scantron sheet) (choose one)
 - Permission to circle answers in question booklet
 - Permission to dictate answers to proctor
- Dictate to a voice recorder (choose one)
 - Digital voice recorder (for use with flash memory cards)
 - Tape recorder (for use with microcassette tapes)
- Other: _____

Equipment or Facility Requirements

- Computer as an accommodation (must have direct nexus to the effects of the disability)
 - with SofTest installed
 - with voice-recognition software (e.g., Dragon Naturally Speaking) installed
 - with screen-reading software (e.g., JAWS) installed
 - with other (specify): _____
- Special equipment (specify): _____

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- Private room
 - Semi-private room
 - Wheelchair accessibility (if table, specify height): _____
 - Other: _____

Please provide a rationale for each request indicated above (attach additional sheets if necessary):

Accommodation of Extra Time

Specify the amount of **extra time** requested for each session of the examination. Indicate why the specified extra time is needed (based on the diagnostic evaluation), provide the rationale for requesting the amount of time for each test format of the examination, and explain how you arrived at the specific amount of extra time requested. If either the amount of time or your rationale is different for different portions of the examination, please explain. **All requests for extra time must specify the exact amount of extra time.** It is important to keep in mind that breaks are included in the timed portion of the examination. No accommodation of unlimited time will be granted. If extra testing time is requested, but the specific amount of extra time is not indicated, the petition will be returned as incomplete.

California Bar Examination: Essay Questions 1, 2 & 3 (standard session is 3 hours): Specify the amount of extra test time needed for this session and provide the rationale:

California Bar Examination: Essay Questions 4 & 5, and Performance Test (standard session is 3 hours and 30 minutes): Specify the amount of extra test time needed for this session and provide the rationale:

California Bar Examination: Multistate Bar Examination - MBE (each standard

session is 3 hours): Specify the amount of extra test time needed for each MBE session and provide the rationale:

First-Year Law Students' Examination: Essay Questions 1, 2, 3 & 4 (standard session is 4 hours): Specify the amount of extra test time needed for this session and provide the rationale:

First-Year Law Students' Examination: Multiple-Choice (standard session is 3 hours): Specify the amount of extra test time needed for this session and provide the rationale:

Explanations: (attach additional sheets if necessary)

CERTIFICATION AND AUTHORIZATION

I am aware that it is my responsibility to file a complete petition, which includes all necessary forms, by the applicable deadline, and I understand that the petition will not be processed if found to be incomplete. I have attached all **original** forms, supporting affidavits and/or documents in legible form. Facsimile, scanned, or other copies are not accepted. All original documents submitted become the property of the Committee of Bar Examiners. I understand that if my petition is not received in the San Francisco Office of Admissions by the final application filing deadline for a particular administration of an examination, it will not be processed for that examination, but for an examination to be administered in the future. This is a "received by" deadline and NOT a postmark deadline. There are no exceptions to the deadline.

I understand that it is possible that my petition for testing accommodations and all supporting documents may be referred to one or more expert consultants retained by the Committee of Bar Examiners for review. I authorize such disclosure, and

further consent to having a State Bar representative, staff or consultant contact my specialist to discuss the information provided by the specialist and my request for testing accommodations for an examination administered by the Committee of Bar Examiners. I also authorize contact with and release of information by all educational institutions and/or testing agencies that have provided me with testing accommodations and/or are considering a pending application for testing accommodations, to clarify the accommodation(s) that have been granted or will be granted or denied.

I declare under penalty of perjury under the laws of the State of California that the information I have provided in support of my petition for testing accommodations is true and correct. I understand that, if the Committee of Bar Examiners determines that I, or a third party on my behalf, submitted as part of this petition any information or documentation that is false, inaccurate or intentionally misleading, it could result in denial of my admission to practice law in California based on moral character grounds.

- I have read and understand and agree to the terms and conditions of this Certification and Authorization.

(Applicant Signature)

(Date)