

THE STATE BAR OF CALIFORNIA
OFFICE OF ADMISSIONS

180 HOWARD STREET
SAN FRANCISCO, CA 94105-1639
(415) 538-2300



1149 SOUTH HILL STREET
LOS ANGELES, CA 90015-2299
(213) 765-1500

**REGISTRATION AS A FOREIGN-EDUCATED GENERAL APPLICANT NOT ADMITTED
TO THE PRACTICE OF LAW IN ANY UNITED STATES OR FOREIGN JURISDICTION
(LAW STUDENTS WHO ARE ENROLLED IN LAW SCHOOLS LOCATED IN THE UNITED STATES
AND ATTORNEYS MUST REGISTER ONLINE AND MAY NOT USE THIS FORM)**

REGISTRATIONS MUST BE TYPEWRITTEN OR LEGIBLY PRINTED IN INK. STAPLE all attachments to the front of the registration. (This is **not** an application for an examination or for a moral character determination. Attach additional pages if necessary. Please read the "Instructions for Registration as a Foreign Educated Applicant" and the bulletin "Qualification for Admission to Practice Law in California by Law Students Receiving Their Legal Education Outside the United States" before completing this form.)

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

_____-_____-_____-_____-_____-_____-

1.2 DATE OF BIRTH

_____/_____/_____
Mo. Day Year

1.3 REGISTRANT'S NAME

Last First Middle

1.4 EMAIL ADDRESS: _____

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

Number/Street and Apartment Number

Address Continued

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

1.6 TELEPHONE NUMBER: (_____) _____ --- _____

1.7 APPLICANT'S BIRTHPLACE: _____

City or Town State or Country

OFFICE USE ONLY
DATE ENTERED/BY: _____-_____-_____/_____ Mo. Day Yr. Initials
DATE APPROVED/BY: _____-_____-_____/_____ Mo. Day Yr. Initials

1.8 MOTHER'S FULL MAIDEN NAME: _____

1.9 GENERAL APPLICANT REGISTRATION FEE (See payment coupon on page 5)

Registration Fee Enclosed \$ _____

2.0 NAMES, FORMER NAMES AND ALIASES - If you have ever been known by any other name(s), please state below and provide the effective dates.

Last First Middle DATES: From To

2.1 I **have** **have not** passed the bar examination in the United States or a foreign country. If you have passed a bar examination, list in which state or country and provide an explanation of why you are not admitted.

Country: _____

Explanation: _____

2.2 FOREIGN LEGAL EDUCATION – Please indicate below the foreign law school(s) you attended (an evaluation completed by a credential evaluation company on the list of approved agencies and transcript must accompany this form):

Name, City, Country of Law School	Dates Attended		Date of Graduation Mo/Yr
	From Mo/Day/Yr	To Mo/Day/Yr	
_____	_____	_____	_____
_____	_____	_____	_____

2.3 UNITED STATES LAW SCHOOL EDUCATION – Please indicate below any United States law schools you have attended and the law school in which you are currently attending, if applicable:

Name of Law School	Dates Attended		Date of Anticipated Completion Mo/Yr
	From Mo/Day/Yr	To Mo/Day/Yr	
_____	_____	_____	_____

Name of Program: _____ Degree Conferred: _____ Date Conferred: _____

Courses and credits completed or currently enrolled in:

Name of Course(s)	Dates Attended	Completed (Yes/ No)	# of Law Study Credits
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

APPLICANT DECLARATION

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

The person named as the registrant in the foregoing registration, declares:

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

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

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

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

Executed on _____
(Date)

at: _____
(Street and Number)

(City, State, Zip, Country)

PRINT: _____
(First Name) (Last Name)

SIGN HERE: _____
(Signature of Declarant)

ETHNIC SURVEY

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

1. What is your sex? Male (1) Female (2) (5) Asian
(Includes Chinese, Japanese, Korean and the peoples of Malaysia and Southeast Asia)
2. Which one of the following racial or ethnic groups **best** describes you?
- Mark only one.**
- (1) American Indian or Alaskan Native
Descended from any of the original peoples of North America.)
- (2) Filipino
- (3) Pacific Islander
(Melanesian, Micronesian, Polynesian)
- (4) Origins in Indian sub-continent
(Pakistan, Indian, Bengal, etc.)
- (6) Hispanic
(Mexican, Puerto Rican, Cuban, Central or South American & Spanish - but not Portuguese)
- (7) Black
(Excludes persons of Hispanic origin)
- (8) White
(Includes persons having origins in any of the original peoples of Europe, Russia, North Africa and the Middle East - and generally corresponds to those persons not classified into one of the 7 specific minority categories)



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

**180 Howard Street • San Francisco, CA 94105-1639 • (415) 538-2300
1149 South Hill Street • Los Angeles, CA 90015-2299 • (213) 765-1500**

For Office of Admissions Fees Only - Credit Card Authorization Form

Date: _____

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

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

- California Bar Examination Fee California Bar Examination Late Fee
- First-Year Law Students' Exam First-Year Law Students' Exam Late Fee
- Laptop Fee Laptop Late Fee

- Registration as a Law Student Fee
- Registration as an Attorney Fee

Other: Please specify _____

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

Credit Card Number _____

Expiration Date _____ (Month/Year)

Check Credit Card Type: Master Card Visa

Name: _____

Address: _____

Foreign Address: _____
(if applicable)

City State Zip _____

Signature of Card Holder: _____

Signature of Applicant: _____
(if not card holder)

Applicant File #: _____ Telephone #: _____

Please submit to: The State Bar of California
1149 South Hill Street
Los Angeles, CA 90015

Fax Number: (213) 765-1544

Please note that delay in responding may result in additional late filing fees/and or possible abandonment of your application.