UBE SCORE TRANSFER APPLICATION

FILING INSTRUCTIONS AND INFORMATION

These instructions apply to persons who wish to file an application for UBE Score Transfer and Admission to the Bar of Arkansas. Retain a copy of these instructions for future reference. All applicants are responsible for reading the *Arkansas Supreme Court Rules Governing Admission to the Bar of Arkansas*. These Rules can be found on the Arkansas Judiciary Website at: https://rules.arcourts.gov/w/ark/rules-governing-admission-to-the-bar.

QUALIFICATIONS FOR ADMISSION

In order to be admitted to the practice of law in Arkansas via UBE Score Transfer Application, the Applicant must:

1. Be a United States citizen, an alien lawfully admitted for permanent residence, or an alien otherwise authorized to work or study lawfully in the United States.
2. Have received a Juris Doctorate degree from a law school approved by the American Bar Association at the time the degree was conferred.
3. Be a person of good moral character and mentally and emotionally stable.
4. Have obtained a scaled score of 270 or better on an UBE Exam **administered** within thirty (36) months of the date the application is received by the Arkansas Supreme Court Board of Law Examiners.
5. Be in good standing in all jurisdictions in which the applicant is currently admitted.
6. Have earned a scaled score of not less than 85 on the Multistate Professional Responsibility Examination.

Mail or Deliver all applications to:

State Board of Law Examiners
Office of Professional Programs
Multi-Agency Complex (MAC) Building
One Capitol Mall, Ste. 3D-101
Little Rock, AR 72201

INSTRUCTIONS FOR COMPLETING THE APPLICATION AND FORMS:

GENERAL INSTRUCTIONS:

1. Your application must be a legible, original printed from the Arkansas Judiciary website. You may use Adobe or another program to type your responses to the questions or you may hand-write your responses on the application. Do not print the application on both sides of the paper.
2. You should refer to these instructions during the application process if you have any questions.
3. Read the entire application and all supplemental forms carefully before making any entries. Give complete answers. Do not leave spaces blank. If a question is not applicable, indicate with "Not Applicable".
4. You must respond completely and provide all relevant details and documents to every question on the application. If the question calls for you to provide names, dates, numbers, details, or documents, you must provide them. If no response is given or if insufficient information is provided in response to any question, your application may be delayed.
5. Be sure to sign and notarize the application and any other forms that require a notarized signature.
6. You must update your application if anything occurs after submission that would change or alter any of your answers to the questions on the application, to include any change in employment status. If you undertake employment for a law firm or other legal entity in Arkansas prior to your licensure, you must supplement your application with that information. Your application must be kept current to the date of admission.

7. You must notify the Board of Law Examiners of any address or name changes. You may provide the information via email to BarExamApplicants@arcourts.gov.
8. If supplemental sheets are used to complete answers, provide all requested information for the question and label each supplemental sheet with the relevant question number. Submit all relevant documents with the application or include explanation when they will be forthcoming.
9. Once you have completed the application, double check to make sure all inquiries are answered. Sign at the required places in the presence of a Notary Public. Finally, mail or hand-deliver the completed application and required fee to the State Board of Law Examiners, Office of Professional Programs, Multi-Agency Complex (MAC) Building One Capitol Mall, Suite 3D-101 Little Rock, AR 72201. The office hours are 8 am to 5 pm Monday through Friday, closed on federal holidays.

APPLICATION FEE

The application fee of $1500, **in the form of a Cashier's Check or Money Order**, made payable to STATE BOARD OF LAW EXAMINERS, will be processed at the time the application is submitted by you. No cash will be accepted. No personal or business checks will be accepted for the fee. The application must be submitted with the required fee before the State Board of Law Examiners will begin processing and evaluating the application.

SPECIFIC QUESTION INSTRUCTIONS

- Residences and Employment: Submit the requested information for each residence or place of employment. There should be no gaps in dates between residences or between places of employment. List all dates of unemployment in the required format. Follow the format in the application and complete supplemental sheets as necessary. Note that if you do not submit complete information for these questions, processing of your application will be delayed.
- Certificates of Good Standing –Request a Certificate of Good Standing from each jurisdiction where you have been admitted containing all information requested in the application be sent directly to the Board of Law Examiners.

Certificates must be dated no more than ninety (90) days prior to the date you submit your application. These must be original Certificates.

- Character and Fitness: If you fail to provide full and complete details to these questions and all the documentation required by each question, your application may be delayed. Be sure to attach all supplemental sheets and supporting documentation for any question answered in the affirmative. If you are unable to submit the supporting documentation with your application, include a statement indicating when it will be received by the Board.

REQUIRED FORMS:

- **Character and Fitness Reference Forms** – You are responsible for providing the Character and Fitness Reference Forms to each reference and following up to make sure that each reference has returned a form to the Board of Law Examiners. Be sure that your name is listed on each form and that you have submitted references who qualify. These forms must be sent directly from the reference to the Board of Law Examiners.
- **Completed Authorization and Release Form**
- **Completed Consent to Release Form** - The Board will submit these to the law schools if additional information is found to be needed. The Board is <u>not</u> ordering your law school transcripts with the Consent to Release Form that you submit with this application.
- **Completed Law School Verification Form –** It is the applicant's responsibility to submit the form to their law school and have the original completed form returned to our Office by the Law School.
- **Completed Arkansas State Police CBC Identity Verification Form Instructions - Only complete this form if you reside in Arkansas.**

Pursuant to Arkansas Code Annotated Section 12-12-211 (d) (1) The State Board of Law Examiners shall be deemed to be a regulatory agency having specific statutory access to the records of the Arkansas Crime Information Center as provided by subsection (a) of this section. (2) In that capacity, the State Board of Law Examiners shall require each applicant for admission to the Bar of Arkansas to be fingerprinted. (3) The center is authorized to accept fingerprints or other information provided to it by the State Board of Law Examiners and is further authorized to release to the State Board of Law Examiners any requested information, including state, multistate, and Federal Bureau of Investigation criminal history records, as they may relate to applicants for admission to the bar.

FINGERPRINTING PROCESS

In-State Applicants (for applicants with an address in Arkansas) -- Upon receipt of your completed application, a State Background check will be completed on behalf of the Board. Once the State Background check is completed, the Board will be provided a search ID number specific to each applicant.

A Fingerprint Harvester/Livescan Payment Confirmation with the search ID number listed on it will then be provided to you, along with a list of Fingerprint Harvester/Livescan Operators located in Arkansas. When you receive the form, you will be required to provide the form to the harvester/livescan operator when you are fingerprinted.

Once you complete the fingerprinting, it is your responsibility to return the Fingerprint Harvester/Livescan Payment Confirmation Form to the Board. You may do so by emailing the completed form to BarExamApplicants@arcourts.gov.

The results of the fingerprint background check will be entered into the Arkansas State Police Criminal Background Check system and then mailed to the Board of Law Examiners by the State Police Identification Bureau.

Out of State Applicants (for applicants presently residing in another jurisdiction than Arkansas) - The fingerprint card must be obtained from the Board of Law Examiners. To request a fingerprint card, email a request to BarExamApplicants@arcourts.gov and request that a card be mailed to you. Be sure to submit your name, complete mailing address and the fact that you are submitting a UBE Score Transfer Application. Fingerprints must be taken within ninety (90) days of the date you submit your application. If the information listed in the instructions for completing the fingerprint card is not on the card or if the fingerprints were taken more than ninety (90) days before the date the Board receives your application, a new fingerprint card will be sent to you.

APPLICATION
FOR TRANSFER OF UBE SCORE
AND ADMISSION TO THE BAR OF ARKANSAS

Return the original application; only original legible applications will be accepted.

Name:_____

First Middle Last Suffix

(Print your full name)

Social Security Number:_____

(Furnishing your social security number is voluntary pursuant to the Federal Privacy Act of 1974. Your SSN will be used for purposes of investigation and verification and will help avoid errors of identity.)

NCBE NUMBER: N_____

Mailing Address for all official correspondence:

_____

(Street or Box Number Address)

_____

(City, State & Zip Code)

_____

(Daytime Telephone Number)

_____

(Email Address)

Uniform Bar Examination (UBE) Information:

Date UBE Taken: _____
Jurisdiction in which UBE taken: _____
UBE Score: _____

You must contact the National Conference of Bar Examiners (ncbex.org) to request that an official UBE score transcript be sent directly to the Arkansas State Board of Law Examiners.

Fee: Make cashier's check or money order payable to the "State Board of Law Examiners". The Cashier's Check or money order in the amount of $1500 must be submitted with the UBE Score Transfer application.

Date of Birth: _____ Birthplace: _____

Attach additional pages, if necessary, to respond fully to the following questions.

Have you ever been known by any other name or surname? ____ If so, explain fully, including exact dates. If your name or surname has been changed by court order, attach a copy of the order.

_____
_____
_____
_____
_____

Driver's License Number_____

State of Issuance _____

PART ONE: RESIDENCES

PREVIOUS RESIDENCE ADDRESSES: List in chronological order every residence address you have had in the last five (5) years beginning with your current one. Give the dates you lived at each address, paying careful attention not to include any gaps in time.

From MO/YR to MO/YR	STREET & NUMBER	CITY & STATE

NOTE: IF YOU NEED ADDITIONAL SPACE, ATTACH PAGES TO THE END OF THIS DOCUMENT.

PART TWO: EDUCATION

List all colleges/universities you have attended, and the degree granted (excluding JD)

College/University	Location	Dates of Attendance	Degree	Date Granted

List all law schools you have attended, including postgraduate law studies. List the law school where you received your Juris Doctorate degree first.

ABA Accredited Law School	Location	Dates of Attendance	Degree	Date Granted

PART THREE: EMPLOYMENT

When answering these questions, follow these instructions:

- Employment encompasses all part-time and full-time employment, including self-employment, externships, internships (paid and unpaid), clerkships, military service, volunteer work, and temporary employment. If you were employed by a temporary agency, provide the name, mailing address, and telephone number of the temporary agency and note the name of the firm/company to which you were assigned.
- Account for all periods of unemployment (i.e. attending law school, studying for the bar examination, seeking employment, etc.).

EMPLOYMENT OTHER THAN THE PRACTICE OF LAW: List all full-time and part-time permanent employment, self-employment, internships, and associations with businesses and professionals you have had since age 18 in chronological order. Exclude the practice of law, but include employment as a law clerk, etc. DO NOT ATTACH A RESUME.

From (MO/YR) to (MO/YR)	Employer Name & Mailing Address	Nature of Business	Position	Reason for Leaving

NOTE: IF YOU NEED ADDITIONAL SPACE, ATTACH PAGES TO THE END OF THIS DOCUMENT.

PART FOUR: MILITARY SERVICE

Are you presently or have you ever served in the Armed Forces of the United States? _____

If yes, attach a detailed statement including:

a) Branch of Service;
b) Identification Number;
c) Highest Rank achieved;
d) Inclusive dates of your service;
e) Whether you received less than an honorable discharge; (If yes, give complete details)
f) Whether you were ever court martialed or subject to any court martial proceedings. (If yes, give complete details.)

If discharged, attach a copy of your separation or discharge papers.

PART FIVE: PREVIOUS APPLICATIONS, EXAMINATIONS or ADMISSIONS

Have you ever previously applied for admission in Arkansas? _____

If yes, complete the following:

Date of Application	Disposition (Withdrawn, Failed, Passed)

Have you ever applied for admission in any other jurisdiction? If yes, complete the following: _____

Jurisdiction	Date of Application	Type of Application (Bar Exam, Reciprocal Motion, UBE)	Date of Exam (if applicable)	Disposition (withdrew, rejected, denied, failed, admitted)

Please note: If you apply for admission in another jurisdiction after submitting this application, you must update your application giving each jurisdiction, date of application and disposition.

PART SIX: LAW PRACTICE

List the jurisdiction(s) where you have been admitted to the practice of law. If you have not been admitted to the practice of law in any jurisdiction, skip to the Character and Fitness portion of the Application.

Jurisdiction	Date of Admission

Please note: If you are admitted to practice law or are denied admission in any jurisdiction subsequent to filing this application, you must submit an addendum to your application giving the name of the jurisdiction and the date or admission or denial.

You must request that a current Certificate of Good Standing from the licensing authority of each jurisdiction (state or territory) where you have been admitted containing the following information be sent directly to the State Board of Law Examiners:

a) The date you were admitted to practice law in that jurisdiction.
b) That you are a member in good standing and are entitled to practice law in that jurisdiction;
c) That there is not now nor has there ever been pending any complaint, grievance, disciplinary proceeding, or disciplinary action against you except as is specifically stated in this certificate; and,
d) As to each such complaint, grievance, disciplinary proceeding or action: the nature of the charge and full facts, including documents verifying the disposition of the matter and the name and address of the person in possession of any records.
e) If you are inactive, submit a statement from the jurisdiction to that effect along with a discipline report for the years you were active.

Certificates that do not contain the above information will not meet the requirements of this question. Certificates must be dated no more than ninety (90) days prior to the date you submit your application.

List the city (ies) and jurisdiction(s) where you have practiced law.

Jurisdiction	City	Dates

Attach a statement in the following format and providing the following information for each state or jurisdiction in which you currently practice or have practiced since first being admitted to the practice of law:

a) The name and exact address of each office or place at which you are or have been engaged in the practice of law and the full names of your employer, supervisor, and the names of any partners and/or associates with whom you worked, specifying their relationship to you;
b) Each period during which you were engaged as an attorney at each employment with exact dates;
c) A complete statement describing your practice of law (include nature and extent of your duties and/or practice) with each employment (including any temporary or part-time work);
d) The reason for termination or discontinuance of each employment period;
e) If you are currently employed by a law firm or legal entity located in Arkansas, describe your responsibilities in detail. If you become employed by a law firm or legal entity in Arkansas, subsequent to the filing of your application but prior to the date of licensure, you must supplement your application and describe your responsibilities in detail.

PART SEVEN: CHARACTER AND FITNESS

If you fail to provide full and complete details to the following questions, the processing of your application may be delayed.

1. Have you ever been arrested, served a summons, cited, questioned, indicted, taken into custody, charged, tried, or investigated for a felony, misdemeanor, infraction (including traffic tickets), or probation violation? _____

In answering this question, include all incidents as a juvenile or adult, no matter how minor the charge, whether guilty or not, whether exonerated or not, whether sentencing was withheld, excluding only non-moving traffic violations which resulted in a penalty not exceeding $25.00. Criminal and / or juvenile matters that have been expunged must be included.

If yes, for each incident (including traffic tickets), regardless of the disposition, you must attach a supplemental sheet specifying in detail the following information:

a) A detailed description of the charge;
b) The date the charge was made;
c) The name, address, and telephone number of each person or entity bringing the charge;
d) The name, address, and telephone number of each attorney you retained to assist you in defending the charge;
e) The reason why the charges were brought against you (the factual basis for the charge);
f) The final disposition of the charge, including probationary conditions. Any asserted probation violations must be detailed.
g) Include copies of the dispositive order of the tribunal sufficient to describe the substantive resolution of the proceeding. If the matter is pending, submit a copy of the original complaint and documentation sufficient to describe the proceeding. For traffic tickets and infractions, if no record of the ticket itself exists, you may submit a driving record report from the state(s) in which any ticket or infraction was issued.

2. Have you ever, in any capacity, been a party to, named, or described in any civil proceeding, action, or suit, including divorce, any court case, bankruptcy, or administrative proceeding? ____

If yes, attach a supplemental sheet specifying in detail:

a) The nature of the proceedings (state the underlying facts in detail and list all parties involved);
b) The tribunal, court, or administrative agency conducting the proceedings;
c) The date of the proceedings;
d) The case number, if any; and,
e) The disposition of the proceedings.

For bankruptcy cases, submit the Statement of Affairs, the Court Docket Sheet, all schedule and final orders, a list of debts not discharged in bankruptcy, and indicate the current status of any plan of reorganization.

Include copies of the dispositive order of the tribunal sufficient to describe the substantive resolution of the proceeding. If the matter is pending, submit a copy of the original complaint and documentation sufficient to describe the proceeding. Delay in providing relevant documents may result in denial or delay of your application.

3. Have you ever been subject to any grievance, complaint, or proceeding which either sought or resulted in your admonition, reprimand, censure, suspension, discipline, citation for contempt, or fine as a member of any profession or occupation, or as the holder of public office? _____ This includes attorney disciplinary or grievance proceedings in other states.

If yes, attach a supplemental sheet specifying in detail:

a) The nature of the proceedings;
b) The tribunal, court, regulatory body, or administrative agency conducting the proceedings;
c) The date of the proceedings;
d) The case number, if any; and
e) The disposition of the proceedings.
f) Include copies of the dispositive order of the tribunal sufficient to describe the substantive resolution of the proceeding. If the matter is pending, submit a copy of the original complaint and documentation sufficient to

describe the proceeding. Delay in providing relevant documents may result in denial or delay of your application.

4. Have you ever been terminated from employment or requested to resign by an employer? _____

If yes, attach a supplemental sheet specifying in detail as to each incident:

a) The name, address, and telephone number of the employer;
b) The name of the person causing your dismissal or resignation;
c) The date of your dismissal or resignation;
d) The reason for such dismissal or request for resignation.
e) Include copies of any written notice of dismissal.

5. Have you ever been accused, formally or informally, with misrepresentation, fraud, misapplication, perjury/false swearing, or misappropriation of property, either individually or in a representative capacity (i.e. as an officer of a business entity, partner, or other fiduciary relationship)? _____

If yes, attach a supplemental sheet specifying all details, including the person or entity making the charge, the circumstances surrounding the charge, and the disposition of the charge.

6. Have you ever been investigated, suspended, expelled, or disciplined, formally or informally, by any school, college or university above the high school level? _____ This includes academic probation.

If yes, attach a supplemental sheet specifying all details, including the custodian of the records of such incidents.

7. Have you ever held a bonded position? _____

If yes, has anyone sought to recover on or cancel such a bond? _____

If yes, attach a supplemental sheet specifying all details, including the name and address of the bonding company.

8. Have you ever been declared a ward of any court or adjudicated an incompetent person? _____

If yes, attach a supplemental sheet specifying all details, including the date and the nature of the proceedings and the court in which they were held.

9. Have you ever applied for a license or certificate requiring proof of good moral character? _____ This includes any applications for admission to the practice of law.

10. Have you ever been denied any license or certificate requiring proof of good moral character? _____

If yes, attach a supplemental sheet specifying all details, including the nature of the license or certificate and the issuing authority's name, address, and telephone number.

11. Have you ever been denied admission or readmission to any school, college, law school or professional organization? _____

If yes, attach a supplemental sheet specifying the details including the nature of the denial and name, address and telephone number of the organization.

12. Are you presently in default on or past due for more than ninety (90) days on any indebtedness? _____

If yes, attach a supplemental sheet specifying all details, including the nature of the indebtedness, the nature of default or delinquency, the name, address, and telephone number of the creditor, and the reasons for the default or delinquency.

13. Are you in default in any way in the performance or discharge of any duty or obligation imposed on you by decree or order of any court, including but not limited to alimony, maintenance or child support? _____

If yes, attach a supplemental sheet specifying all details, including the nature of the default, the name, address and telephone number of the court and the reasons for the default.

14. Within the past five (5) years, have you asserted any mental, emotional, or psychological condition or impairment as a defense, in mitigation, or as an explanation for your conduct in the course of any administrative or judicial proceeding or investigation; any inquiry or other proceeding; or any proposed termination by an educational institution, employer, government agency, professional organization or licensing authority? _____

If yes, attach a supplemental sheet specifying all details, including pertinent names, addresses, dates and references to records, as appropriate.

15. Has your conduct ever been called into question with reference to the unauthorized practice of law in Arkansas or any other jurisdiction? _____

If yes, attach a supplemental sheet specifying all details, including the nature of the charges, the accuser, the name, address and telephone number of the investigative body and the disposition of the charges.

16. Have you ever engaged in conduct which might be regarded as evidencing an inclination to be dishonest, to take unfair advantage of others or to be disloyal to those to whom a loyalty is legally owed? _____

If yes, attach a supplemental sheet specifying all details.

17. Have you ever supported or advocated the overthrow of the U.S. government by force? _____

If yes, attach a supplemental sheet specifying all details.

18. Have you ever had a record sealed which contained facts relating to you? _____

If yes, attach a supplemental sheet specifying in detail the precise description of the record that was sealed, the name and address of the person or entity having custody of those records and the reasons a request was made for sealing those records.

19. Are there any facts not disclosed by your answers concerning your background, history, experience or activities which may cause one to question your character, fitness or ability to practice law? _____

If yes, attach a supplemental sheet specifying in detail all relevant facts.

20. INCOME TAX RETURNS: Have you filed federal and state income tax returns for all years when your income warranted such filings? _____

PART EIGHT: GENERAL REFERENCES

a) Give the names of five (5) people who are able and specifically authorized by you to provide a factual, accurate and reliable appraisal of your moral character and general fitness to practice law. As is noted on the reference form, it is your responsibility to alert references that delay in returning the forms could delay completion of the review of your application.

b) These people must not be related to you by blood or marriage. List persons who have known you for a minimum of four (4) years.

c) Make certain that no two persons listed are members of the same household or the same business.

d) You must send the Reference Form to these individuals. List your name on the top of each reference form and request that references submit the completed form directly to the State Board of Law Examiners, via email to BarExamApplicants@arcourts.gov, fax to 501-374-1853, or mail to One Capitol Mall, Ste. 3D-101 Little Rock, AR 72201.

Name	Occupation	Nature and Length of Acquaintance (Months/Years)

PART TEN: VERIFIED STATEMENT

State of _____

County of _____

I, _____, being first duly sworn, depose and say that:

I am the applicant named in and who has signed this application for the transfer of my UBE score and admission to practice law in the State of Arkansas and fully understand no refund will be made, in whole or in part, of any application or investigation fee and that the deadlines for providing supplementary material for this application cannot be extended or waived by the staff or Board of Law Examiners of the Arkansas Supreme Court.

I fully realize that the determination as to whether I am admitted to practice law in Arkansas may depend largely on the truth, falsity, or completeness of my answers in this application and the attached statements.

I will give any further information, including fingerprints, as requested.

To my knowledge, the answers that I have given to the questions are accurate and complete.

I authorize the Supreme Court of the State of Arkansas and the State Board of Law Examiners, or any agent or authorized representative thereof, to conduct a complete investigation of my character and fitness to practice law in Arkansas and of the completeness and truthfulness of my answers. I hereby release and exonerate those authorized to conduct that investigation.

I have read the Arkansas Supreme Court Rules Governing Admission to the Bar of Arkansas related to admission to practice law in Arkansas.

_____ _____

Date Applicant's Signature

Subscribed and sworn before me this _____ day of _____, 20____.

SEAL _____

Notary Public for_____

My Commission Expires_____

APPLICATION FOR TRANSFER OF UBE SCORE AND
ADMISSION TO THE BAR OF ARKANSAS
AUTHORIZATION AND RELEASE FORM

I, _____, born at _____
(Name) (City and State)

on _____, having filed an application for admission to the Bar of Arkansas, hereby consent to have an investigation conducted as to my moral character, professional reputation and fitness for the practice of law.

I authorize and request every person, firm, company, corporation, governmental agency, professional admission or licensing agency, hospital or medical facility or institution having control of any documents, records and other information pertaining to me, including records pertaining to any drug or alcohol treatment, to furnish to the State Board of Law Examiners any such information, including documents, records, reports, disciplinary files regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data, and to permit the State Board of Law Examiners or its agents to inspect and make copies of such documents, records and other information. I further authorize the State Board of Law Examiners to release information pertaining to my application as necessary to conduct and complete its investigation.

I hereby release, discharge and exonerate the State Board of Law Examiners, its agents and representatives and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information or the investigation conducted by the State Board of Law Examiners.

I have read the foregoing document and hereby agree to its terms.

_____
Signature of Applicant

Subscribed and sworn to before me SEAL
this the ____ day of _____, 20___

_____
Notary Public

My Commission Expires _____

APPLICATION FOR TRANSFER OF UBE SCORE AND
ADMISSION TO THE BAR OF ARKANSAS
CONSENT TO RELEASE STUDENT RECORDS

Full Name: _____

Last Four Digits of Social Security Number: _____

I give the _____Law School permission to release the following documents:

- Any application to the Law School, including the "Personal Information Form" and the "New Student Application" or equivalent documents.
- Any other information maintained in the institution's records, including but not limited to those of the Law School, which would be relevant to my general character and fitness, including any information that bears upon my character and fitness for admission to the practice of law. This consent includes, but is not limited to, any proceedings or disposition alleging academic misconduct, dishonesty, or other violations of applicable student codes of conduct.

to the Arkansas State Board of Law Examiners for the purpose of examination of my character and fitness to be admitted to the practice of law in the State of Arkansas.

_____
Signature of Applicant

Subscribed and sworn to before me

this _____ day of _____, 20___ SEAL

_____

Notary Public

My Commission Expires _____

APPLICATION FOR UBE SCORE TRANSFER AND
ADMISSION REFERENCE FORM

The applicant named below has applied for UBE score transfer and admission to the Bar of Arkansas as an attorney licensed to practice law in Arkansas. Please complete this questionnaire and return it immediately to the State Board of Law Examiners by email to BarExamApplicants@arcourts.gov, by mail to One Capitol Mall, Ste. 3D-101, Little Rock, AR 72201, or by fax (501) 374-1853.

Applicant:_____

Reference Name: _____

Reference Address: _____

Reference Telephone Number: _____

The information you provide on this form is confidential, except as provided by the Arkansas Supreme Court Rules Governing Admission to the Bar.

Nature of acquaintance / relationship: _____

How long have you known the applicant? _____

Please answer the following questions based on your personal knowledge:

1. Do you feel that you know the applicant well enough to make an accurate appraisal of the applicant's character and fitness to the practice of law in the State of Arkansas? _____
2. Are you related to the applicant in any way? _____
   If yes, describe the relationship. _____
3. Do you represent the applicant in any capacity? _____
   If yes, describe the representation. _____
4. To your knowledge has the applicant ever been convicted of a crime? _____
5. To your knowledge has the applicant ever engaged in any conduct involving the following?
   a. Dishonesty _____
   b. Taking unfair advantage of others _____
   c. Being disloyal _____
   d. Being irresponsible in business or professional matters _____
   e. Supporting or advocating the overthrow of the US government by force __
   f. Engaging in the practice of law while not being licensed _____
   g. Violating reasonable rules of conduct in any activity _____

h. Failing to exercise self-control, including excessive and continuing violation of traffic rules, the improper use of drugs, and the excessive use of alcohol _____
i. Being mentally or emotionally unstable

6. To your knowledge has the applicant ever been disciplined by any authority? _____
7. Do you know any reason the applicant should not be licensed as an attorney in Arkansas? _____
8. Are there any facts not previously disclosed by your answers concerning the applicant's background, history, experience, or activities, which may have a bearing on his/her character, fitness, or eligibility to practice law in Arkansas? _____
9. Do you have any reason not to trust the applicant with your money? _____
10. Do you have any reason not to trust the applicant with other people's money? _____

If you answered yes to questions 2 through 10, please explain below.

Question # Explanation

_____ _____

_____

_____ _____

_____

_____ _____

_____

Comments:

_____
_____
_____
_____
_____

I swear / attest that the information provided herein is true and factual to the best of my knowledge.

Date: _____ Signature: _____

SUPREME COURT OF ARKANSAS
Office of Professional Programs
State Board of Law Examiners
Arkansas Continuing Legal Education Board
**** It is the applicant's responsibility to have this form completed and returned with the application.**

To: Arkansas State Board of Law Examiners
Multi-Agency Complex (MAC) Building
One Capitol Mall, Ste. 3D-101
Little Rock, AR 72201

Law School:_____

Address: _____

_____

Re: _____
Graduate's Full Name

_____
Last Four Digits - Social Security Number

_____
Date of Graduation

The graduate noted above received the Juris Doctor Degree from this institution on the date shown above. The graduate's records ____do not ____ do indicate any honor code violations or any other derogatory information bearing on the graduate's character or fitness to practice law.

This law school was fully accredited by the American Bar Association in _____. (year of accreditation).

_____
Signature

(S E A L)

_____
Title

Date _____

Criminal Background Check (CBC) Identity Verification Form Instructions

Please read the instructions below carefully and contact the Board with any concerns or questions. Failure to follow the correct procedures will delay the processing of your application and our receipt of your background check results.

ONLY COMPLETE IF YOUR RESIDENCE ADDRESS IS IN ARKANSAS.

- Fill out all the required information on the Criminal Background Check Identity Verification (CBC) Form. This form will need to be submitted to the Board **BEFORE** going and getting fingerprinted.

- Once the Board receives and processes your Criminal Background Check Identity Verification Form and completes the state background check, you will receive a copy of your CBC Form back with a **Transaction Control Number** from the Board via email or mail.

- You will take a printed copy of the CBC Form to an appropriately trained Fingerprint Harvester to **have your fingerprints taken electronically**. They will use the transaction number provided by the Board to ensure that your background check results are returned to the Board. The fingerprint harvester may charge their own independent service fees to capture your fingerprint submission.

- Once fingerprinted, have the person that took your prints **fill** out the "Fingerprint Harvester Information" portion of the CBC Form. They will return the form to you, and you will be responsible for **returning** the CBC Form to the Board with the Harvester Information completed. You can email, fax, or mail this completed CBC Form to the Board.

NOTES:

- The transaction number that is provided is specific to you and is directly tied to the state background check run on your behalf by the Board. It cannot be used to run a background check for any other type of state licensure, and we cannot accept the background check results run by any other agency. Background checks must be run through the Board for all admission applicants.

- **DO NOT CONTACT the Fingerprint Harvester, Live Scan Operator, Arkansas State Police, or the FBI** about the status of your criminal background check. Those agencies will notify the Arkansas State Board of Law Examiners. The average processing time for the Board to receive the results of your background check is **three weeks** from the time that your fingerprints are submitted.

- **Out of State Applicants:** If you are an out of state applicant (meaning your address is in another jurisdiction besides Arkansas) you will only be able to submit an FD-258 fingerprint card. Please contact the Board to obtain the fingerprint card to use.

Arkansas State Board of Law Examiners

Robert Brech, Executive Director
Supreme Court of Arkansas
One Capitol Mall, Ste. 3D-101 Little Rock, AR 72201
Telephone (501) 374-1855
Email: barexamapplicants@arcourts.gov
Website: https://www.arcourts.gov/administration/professional-programs/asble

Criminal Background Check (CBC) Identity Verification Form

APPLICANT INFORMATION (Please fill out all the fields below and send to the Board BEFORE going to be fingerprinted):

Full Name:

Last First Middle Maiden / All Other Married Names

Social Security #: Date of Birth: State of Birth:

Sex: Race: Height: Weight: Eyes: Hair:

Driver's License #: State of Issuance (of driver's license):

Mailing Address:

Street Address City State Zip

I understand that my personal information and fingerprints submitted by agency are used to search against criminal identification records from both Arkansas Crime Information Center (ACIC) and Federal Bureau of Investigation (FBI). I hereby authorize the release of any records to the person or agency listed above. I further understand ACIC and the FBI may also retain the submitted information and fingerprints as permitted by the Privacy Act of 1974, 5 USC § 552a, for routine uses beyond the principal purpose listed above.

Signature of Applicant Date

ATTENTION HARVESTER OR LIVESCAN OPERATOR: Please follow the instructions below for fingerprinting this applicant.

1. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and the information above.
2. Please fill out the information in the boxes below for "FINGERPRINT HARVESTER INFORMATION". Please print clearly. Please return completed form to the applicant to return to the Board.

FINGERPRINT HARVESTER INFORMATION:

REASON FINGERPRINTED: (RFP)

Authority: ACA § 12-12-211 **Agency ID:** AR 920110Z

Agency Name: AR State Board of Law Examiners, Little Rock, AR

TRANSACTION CONTROL NUMBER: (Confirmation Number) **LAW**

Date Fingerprints were Taken:

Type of Photo ID provided: ☐ Driver's License ☐ Passport ☐ Military ID ☐ Other:

Harvester Facility Name:

Harvester Operator Telephone Number:

Printed Name of Harvester Operator Signature of Harvester Operator

** Ensure that the correct fingerprinting reason code and agency ID are used.

Privacy Act Statement

Privacy Act of 1974, 5 USC § 552a

- **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 FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint 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.

Procedure to obtain change, correction, or updating of identification records

28 CFR § 16.30 through 16.34

If, after viewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wish changes, corrections, or updating of the alleged deficiency, he/she should make application directly to the agency which contributed the questioned information.

The individual can contact Arkansas Crime Information Center (ACIC) at (501) 682-7444 or Arkansas State Police at (501) 618-8000. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the:

FBI, Criminal Justice Information Service (CJIS) Division
ATTN: SCU, Mod. D2
1000 Custer Hollow Road
Clarksburg, WV 26306

The FBI will then forward the challenge to the agency which submitted the date requesting that agency to verify or correct the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency.