NEW JERSEY BOARD OF BAR EXAMINERS REQUEST FOR COPY OF PREVIOUSLY FILED NEW JERSEY BAR APPLICATION

INSTRUCTIONS

Please print or type clearly. Depending on the location of your file, it may take up to three (3) weeks to retrieve from storage.

- 1. Complete the request form on page 2.
- 2. Attached a notarized copy of your current Driver's license, U.S. Passport, or Government-issued non-driver ID card.
- 3. If you are requesting a copy your bar application to be mailed to another jurisdiction, you must complete the Authorization and Release form on page 3.
- 4. Mail your request form with an original signature, based on your preferred method as addressed below.

Via United States Postal Service (First-Class, Express and Priority Mail):

New Jersey Board of Bar Examiners P.O. Box 973 Trenton, NJ 08625-0973

Via an expedited delivery provider (Fed-Ex, UPS, DHL):

New Jersey Board of Bar Examiners Hughes Justice Complex 25 Market Street 8th Floor, North Wing Trenton, NJ 08611

NOTE:

- Fees for copying are five cents (\$0.05) per page for letter size pages.
- To ensure the confidentiality of bar applicant records, as required by New Jersey Court Rule 1:23-3(a), all requests for copies of previously filed New Jersey Bar applications must be made by the applicant only.
- Upon receipt of your completed request form and retrieval of your file, you will be notified of the appropriate copy charges which will be payable to: *New Jersey Board of Bar Examiners*.
- Upon receipt of the fee, the application will be forwarded to the entity listed below.

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REQUEST FORM

Examination Candidate ID Number (if known)	
If you have ever been known by another name other than a nickname (e.g. maiden name), pleaspecify:	ıse
Current Name	
Current Address	
City, State, Zip	
Please send my copy to the following address:	
Name	
Address	
City, State, Zip	
OR	
Please send my copy via e-mail to:	
E-Mail Address	
Your Contact Information (so that we may contact you should we have any questions):	
Telephone	
E-Mail Address	
Your Signature: Date:	

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AUTHORIZATION AND RELEASE

This form is only required when you are requesting a copy of your bar application to be mailed to another jurisdiction.

Ι,	(name) hereby give
permission to the New Jersey Board of Bar	r Examiners and Committee on Character in
connection with review of my file by the _	(name of entity)
To release directly to	
all information on my application to the Ne such entity or person cooperate with any fu	Idress of entity) ew Jersey bar. I further authorize and consent to have urther inquiries from the designated entity in eation and character review. I understand that the
Bar Examiners and Committee on Character authority of the above jurisdiction, its agen furnishing information from any and all lia	the State of New Jersey and the New Jersey Board of ter, their agents and representatives, the admitting atts and representatives, and any person or entity so ability of every nature or kind arising out of the s, records, and other information or the investigation g authority.
X	
X Signature of candidate	Date
Executed and acknowledged before me this	s day of, 20
Signature of Notary Public or Attorney a	
Notary to affix seal or stamp (place bel	iow)
For Office Use Only:	
Fee owed: Pec's	d on: Initial:

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