Supreme Court of Wisconsin

BOARD OF BAR EXAMINERS
110 EAST MAIN STREET, SUITE 715
P.O. BOX 2748
MADISON, WI 53701-2748
TELEPHONE: (608) 266-9760

Dean's Certificate for Wisconsin Bar Examination Applicant

TO THE APPLICANT: Complete the top section of this form (name, law school and dates of attendance) and send the form to the Dean of your law school. The Dean must complete and sign the form and mail it to the Board at the address above. Applicants are ineligible for admission to practice law in Wisconsin unless this form has been received directly from the law school. This form is not accepted via email or facsimile transmission.

Name of Applicant: _____

Name of Law School: _____

Dates of Attendance: _____

VERIFICATION OF J.D. (to be completed by law school)

Please complete the correct statement for this applicant:

___ The applicant graduated with the degree of Juris Doctor on _____.
date

___ The applicant has officially fulfilled all graduation requirements; Juris Doctor will be conferred on _____.
date

___ The applicant has not fulfilled all graduation requirements; Juris Doctor is anticipated by _____.
date

VERIFICATION OF CHARACTER AND FITNESS (to be completed by law school)

Is the applicant's record clear from the standpoint of academic integrity and scholarship?

____ Yes ____ No*

Does the applicant's record contain any information that reflects unfavorably on their character or fitness to practice law?

____ Yes* ____ No

Print name of certifying official: _____ Title: _____

Signature: _____ Date: _____

* A certified copy of the applicant's Authorization and Release will be sent to you with a request for additional information.