Supreme Court of Wisconsin

Print Form

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

AMENDMENT TO APPLICATION

Please check one of the following:

◯ Diploma Privilege ◯ Wisconsin Bar Examination ◯ Proof of Practice Elsewhere

- **All attachments must be typewritten or computer generated.**
- **Attach additional pages as necessary.**

I, _____,
(applicant name)

understand that my application for admission to the practice of law in Wisconsin is a continuing application and for this reason I hereby amend my application with the following additional facts and information which correctly and fully bring the previously filed Applicant Questionnaire and Affidavit to a current status. This amendment applies to any application questions or any Board correspondence:

I, _____,
(applicant name)

being first duly sworn, on oath depose and state that I have read, or have had read to me, the foregoing amendment and all attachments, and that the information contained therein is true and correct.

STATE OF _____

COUNTY OF _____

Subscribed and sworn to before me
on _____

_____
Signature of Applicant

_____
Notary Public (print name)

_____
Notary Public (sign name)

Notary Seal or Stamp

My commission expires: ☐ expires _____.
☐ is permanent.

* A notarial seal or stamp is required.