



ONLINE HELP MANUAL

MARYLAND JUDICIARY2010

State Board of Law Examiners

2011-F, Commerce Park Drive,

Annapolis, Maryland 21401,

(410) 260-3640

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Introduction

The State of Maryland Judiciary Administrative Office of the Courts welcomes you to the Electronic Bar Application System [eBar application], a Web based tool for Law School applicants/graduates appearing for the General Bar Examination.

The State Board of Law Examiners is an administrative arm created by the State of Maryland Judiciary to handle matters relating to admission to the Bar. The primary purpose of the Bar examination is to ensure that all who are eventually admitted have a minimum technical competence. In the State of Maryland, an applicant must be of good moral character and must successfully complete the Maryland Bar Examination.

The purpose of this web-based application is to modernize the current legacy system and transform the paper based system to an electronic system that will help applicants to fill up admission forms electronically in a secure and user friendly i. The online system will use unique user IDs and passwords to ensure security. Applicants can log in to the application from anywhere anytime.

User characteristics

Prospective applicants can visit either the general bar Website at <u>https://portal.mdcourts.gov/ebarapp/login.do?tmpl=g</u> or the Out of State at : <u>https://portal.mdcourts.gov/ebarapp/login.do?tmpl=o</u>

In order to submit an online application, each applicant should first establish an account. Once an account is created, the online application sends an email to the email address provided by the user. The email will contain an activation link along with the user name for the user to log on. The user ID will be the user's email ID itself. The password should have a minimum of eight characters and must contain at least a letter, a number, and any of these special characters !, @, #, \$, %, &.

In case the email ID becomes unusable, you should contact the SBLE office at the address provided above for help and trouble shooting of account issues.

HOME PAGE

The Home page contains the following (Fig 1);

- Quick Links
- Procedure for filing online application/petition
- Login window



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QUICK LINKS

Quick Links

- Bar Admission Rules General Bar: Exam Details Exam Questions & Answers **Contact the Board** What's New
- **Create an Account**
- Login

Fig 2 – Quick Links

Quick Links section has the following links (Fig 2);

- Bar Admission Rules
- General Bar: Exam Details
- Exam Questions & Answers
- Contact the Board
- What's New
- Create an Account
- Login



Fig 3 - Bar admission Rules link opens to Rules governing admission

Clicking the *Bar Admission Rules* link from the Quick Links window opens to a PDF document explaining the 'Rules Governing Admission to the Bar of Maryland' (Fig 3).

GENERAL BAR: EXAM DETAILS

Clicking this link displays (Fig 4) the details of the General Bar Exam.

mdcourts.gov	HOME OPINIONS JOBS FORMS FAQ₅ SITE INDEX CONTACT US SEARCH			
State Board of Law Examiners				
HOME				
Bar Admission Rules	General Bar Exam Details			
General Bar Exam Details	Description and Time on the Descrift Weither Test (WestDesfect on DDT)			
Out-of-State Attorneys. Exam Details	Description and Tips on the Board's Written Test (<u>WordPerfect</u> or <u>PDF</u>) Description and Tips on the Multistate Bar Exam (<u>WordPerfect</u> or <u>PDF</u>) Multistate Bar Examination Information Booklet - <u>http://www.ncbex.org/multistate-tests/mbe/</u>			
To Request Test Accommodations	FAQ's - General Bar Examination (<u>WordPerfect</u> or <u>PDF</u>) Prohibition on Digital Watches and Devices Study Materials, Backbacks, Carry Bags and Luggage			
Exam Questions & Answers	Application Process - Dates, Exam Sites, Deadlines & Fees (<u>WordPerfect</u> or <u>PDF</u>)			
What's New	Steps for Admission to the Bar (<u>wordPerfect</u> or <u>PDF</u>) To Obtain an Application by Mail (<u>WordPerfect</u> or <u>PDF</u>)			
Contact the Board	 <u>To Download the Application Forms</u> Waiver for Graduates of Non-ABA Law Schools (<u>WordPerfect</u> or <u>PDF</u>) To Transfer a Maryland MBE score: <u>http://www.ncbex.org/multistate-tests/mbe/services/transfers</u> 			
Notice of Fee Increase				

Fig 4: General Bar exam details and its links

This section provides the following General Bar exam details:

- Description and Tips on the Board's Written Test
- Description and Tips on the Multi state Bar Exam
- Multi state Bar Examination Information Booklet
- FAQ's General Bar Examination
- Prohibition on Digital Watches and Devices, Study Materials, Backpacks, Carry Bags and Luggage
- Application Process Dates, Exam Sites, Deadlines & Fees
- Steps for Admission to the Bar
- To Obtain an Application by Mail
- To Download the Application Forms
- Waiver for Graduates of Non-ABA Law Schools
- To Transfer a Maryland MBE score

Each of these has a link that takes you to the corresponding details.

EXAM QUESTIONS & ANSWERS

Clicking this link takes you to the 'Description and Purpose of Exam Questions and Answers' page (Fig 5).

	State Board of Law Examiners
номе	
Bar Admission Rules	DESCRIPTION AND PURPOSE OF EXAM OUESTIONS AND ANSWERS
General Bar Exam Details	
Out-of-State Attorneys: Exam Details	In order to assist persons wishing to prepare for the written portion of Maryland Bar Examinations, the State Board of Law Examiners provides the following materials:
To Request Test Accommodations Exam Questions & Answers	 The Out-of-State Attorneys Analysis includes each question as it appeared on the Maryland Out-of-State Attorneys bar examination and the Board's Analysis, which is a discussion of the principal legal and factual issues raised by each question. The Board's Analysis is not a model answer, nor is it an exhaustive listing of all possible legal issues suggested by the facts of the question.
Contact the Board	The General Exam Board's Analysis consists of a discussion of the principal legal and factual issues raised by each question on the Maryland general bar essay test. It is prepared by the Board. The Board's Analysis is not a model answer, nor is it an exhaustive listing of all possible legal issues suggested by the facts of the question.
Notice of Fee Increase	3. The Representative Good Answers includes a reprint of each question as it appeared on the general bar essay test followed by one or more actual answers to the essay question. The answers are reproduced without any changes or corrections by the Board, other than spelling. The Representative Good Answers are provided to illustrate how actual examinees responded to the question. The Representative Good Answers are not average passing answers nor are they necessarily answers which received a perfect score; they are responses which, in the Board's view, illustrate successful answers.
	4. The Multistate Performance Test (MPT) material includes Representative Good Answers for the MPT question administered as part of the general bar examination and explains how to obtain copies of the MPT question from the National Conference of Bar Examiners.
	5. The General Exam Extracts material is a PDF copy of the actual printed extracts from the general bar examination. The extracts provide selected materials from the Maryland Rules or other articles of the Annotated Code of Maryland which are intended to assist the examinee in answering one or more of the essay questions.
	Exam Questions & Answers
	 February 2009 Out-of-State Attorneys' Analysis (<u>WordPerfect</u> or <u>PDF</u>) February 2009 General Exam Board's Analysis (<u>WordPerfect</u> or <u>PDF</u>) February 2009 Representative Good Answers (<u>WordPerfect</u> or <u>PDF</u>) February 2009 Multistate Performance Test (<u>WordPerfect</u> or <u>PDF</u>) <u>General Exam Extracts</u> (PDF)
	 July 2008 Out-of-State Attorneys' Analysis (<u>WordPerfect</u> or <u>PDF</u>) July 2008 General Exam Board's Analysis (<u>WordPerfect</u> or <u>PDF</u>) July 2008 Representative Good Answers (<u>WordPerfect</u> or <u>PDF</u>) July 2008 Multistate Performance Test (<u>WordPerfect</u> or <u>PDF</u>) <u>General Exam Extracts</u> (PDF)
	February 2008 Out-of-State Attorneys' Analysis (<u>WordPerfect</u> or <u>PDF</u>) February 2008 General Exam Board's Analysis (<u>WordPerfect</u> or <u>PDF</u>) February 2008 Representative Good Answers (<u>WordPerfect</u> or <u>PDF</u>) February 2008 Multistate Performance Test (<u>WordPerfect</u> or <u>PDF</u>) <u>General Exam Extracts</u> (PDF)
	 July 2007 Out-of-State Attorneys' Analysis (<u>WordPerfect</u> or <u>PDF</u>) July 2007 General Exam Board's Analysis (<u>WordPerfect</u> or <u>PDF</u>) July 2007 Representative Good Answers (<u>WordPerfect</u> or <u>PDF</u>) July 2007 Multistate Performance Test (<u>WordPerfect</u> or <u>PDF</u>) <u>General Exam Extracts</u> (PDF)
	February 2007 Out-of-State Attorneys' Analysis (<u>WordPerfect</u> or <u>PDF</u>) February 2007 General Exam Board's Analysis (<u>WordPerfect</u> or <u>PDF</u>) February 2007 Representative Good Answers (<u>WordPerfect</u> or <u>PDF</u>) February 2007 Multistate Performance Test (<u>WordPerfect</u> or <u>PDF</u>) <u>General Exam Extracts</u> (PDF) Exam Ouestions & Answers Archive 1998-2006

Fig 5 - Description and Purpose of Exam Questions and Answers

CONTACT THE BOARD

Clicking the *Contact the Board* link (Fig 6) displays General Information about the SBLE office and its working hours.

	State Board of Law Examiners
номе	
Bar Admission Rules	General Information
General Bar Exam Details	2011 Commerce Park Drive Annapolis, Maryland 21401
Out-of-State Attorneys: Exam Details	(410) 260-3640 sble@courts.state.md.us
To Request Test Accommodations	Office Hours - 8:30 a.m. to 4:30 p.m., Monday - Friday
Exam Questions & Answers	Chairman: Jonathan A. Azrael, Esquire
What's New	Secretary: Bedford T. Bentley, Jr., Esquire
Contact the Board	Directions to the Board
Notice of Fee Increase	

Fig 6 – Contact the Board details

Further, clicking the *Directions to the Board* link (Fig 7) opens up a map showing the location and providing the necessary directions to the Judicial Training Center from various locations.



• Make a right at the sign for Building Eight, enter at #2011D. Additional parking in the rear at #2009D entrance.

Fig 7 – Directions to the Board

NOTICE OF FEE INCREASE

Clicking this link displays a page showing details of changes in the fee structure (Fig 8)

Effective January 1, 2009, Maryland Bar Application Fees Will Increase as Follows:

GENERAL BAR EXAMINATION

(for graduating law students and attorneys not qualified for the Attorneys' examination)

- 1. The "Application for Admission" fee will be:
 - \$225, if the application is timely filed,
 - \$275, if the application is filed late.
- 2. The "Original Petition" fee will be \$250.
- 3. The fee for a repeater to retake the General Bar examination will be \$250.

OUT-OF-STATE ATTORNEYS' BAR EXAMINATION

(for attorneys with a minimum of 5 years of qualifying experience)

1. The attorney petition fee payable to the State Board of Law Examiners will be \$700.

2. The fee for a repeater to retake the Attorneys' examination will be \$250.

3. The character investigation fee, payable to the National Conference of Bar Examiners, will remain \$250 until July 1, 2009, when it will increase to \$300.

Fig 8 – Fee structure

CREATE AN ACCOUNT

Clicking this link opens

to	
Create an Account To Start the Applic	ation Process For Bar Of Maryland
* fields are mandatory	
Create Account For *	General Bar Examination
Email Address(User Name) *	my_email_address@yahoo.com
Password *	(It should have minimum 8 characters and have at least one of each - a letter, a number and a special character eg., 1,@,₱,\$,%,&)
Confirm Password *	(Must match the password that you have entered above)
First Name * (Enter Your Legal Name)	
Middle Name	Please check if you have no Middle Name
Last Name *	
Suffix	•
Gender : *	C Male C Female
Date of Birth (mm/dd/yyyy) *	(You have to be at least 18 years of age to be admitted to the Bar of Maryland)
Social Security Number *	
Confirm Social Security Number *	
Disclosure of your Social Security Number (SSN name, SSN, and address to the Child Support Enfi and address to the Client Protection Fund when y Client Protection Fund, in turn, will disclose this i determining whether lawyers have paid all undisp the Character Committees appointed by the Cour) is mandatory pursuant to the Family Law Article, Title 10, section 10-119.3 (b), Annotated Code of Maryland. The State Board of Law Examiners will disclose your orcement Administration, upon its request, to assist it in enforcing compliance with child support orders. The State Board of Law Examiners will provide your name, SSN, ou are recommended for admission to the bare of the State of Maryland. Pursuant to the Business Occupations and Professions Article. Title 10, section 10-313, the nformation to the State Department of Assessments and Taxation to assist it in identifying new businesses within the State and to the Comptroller to assist it in stat axæs and unemployment insurance contributions payable to the Comptroller or the Secretary of Labor, Licensing, and Regulation. The Court of Appeals of Maryland, t, and the State Board of Law Examiners will use the SSN for positive identification of bar applicants in the course of character and fitness investigations.

You should add an email address that you wish to use for the purpose of setting up your account, make sure that this email is valid and correct, if you enter an incorrect email address then you will have to re-enter all of this information again, complete all sections and ensure that you have completed all of the areas that are requested.

The password should have a minimum of eight characters and must contain at least a letter, a number, and any of these special characters !, @, #, \$, %, &.

	Place Of Birth
Country *	United States
State *	Maryland
City *	Rockville
	Mailing Address
Country *	United States
Address *	My address
County *	My county (If not within a county ,enter N/A)
City *	Rockville
State *	MD
Zip *	20854
	Permanent Address Check If you like to use your Mailing Address as Permanent Address 🗵
Country *	United States
Address *	My address
County *	My county (If not within a county ,enter N/A)
City *	Rockville
State *	MD
Zip *	20854
Residence Phone	2024445555
Office Phone	3016781234
Cell Phone	
Security Question *	Mother Maiden Name
Answer *	Love
Hint *	Mum

Create Account Cancel Request

PROCEDURE FOR FILING ONLINE APPLICATION

Submitting an online application/petition

😫 Establish an account

Each applicant must establish an account in order to submit an online application and/or petition for the bar examination. This is done only once. After an account is created applicants will need his or her username and password in order to login and access their application.

Completing the application

Review Examination requirements, follow instructions and complete the requested information. Use the Check List to insure the application is complete and that you meet all requirements at the time you submit your application/petition.

Submitting the application/Petition

When all sections of your application are complete and you have obtained all required supporting documentation using the check list. Submit your online application. After you have submitted online, Print your application using the print option available within the application after completing all sections of the application. Review and sign all acknowledgments, enclose all required supporting documentation and forward completed packet to:

State Board of Law Examiners 2011 F Commerce Park Drive Annapolis, MD 21401

You will receive a notification after the Board receives and reviews your application to confirm that it is complete and it appears that you are eligible to take this examination.

You may login and check "My Status" page at any time to see the current status of your application.

🚊 Payment

You must provide a check or money order payable to State Board of Law Examiners in the required fees for filing a Maryland Bar Application, Original Petition or Retake Petition. The fees required appear on the Filing Fee form. This form includes the fee required for an updated Application. You will receive notification when the State Board of Law Examiners accepts your Application and Petition.

Figure 9 – Procedures before submitting an application

This section (Fig 9) explains the procedures that an applicant ought to know before filing an online application. An

applicant needs to establish an account in order to submit an online application. The section provides vital

information that will help candidates fill up the application form properly. It also provides details regarding the mode of payment.

.OGIN		
EmailAddress (UserName)		
Password		
Create Account A Forgot Password	🛃 Login	

Fig 10: Login window

EmailAddress (UserName)	gmail.com
Password ••••••	
Create Account Forgot Password	🛃 Login

Fig 11 – Enter valid email ID

Enter the same email ID that you used t created your account, ensuring the User Name and a password are correct. Clicking the *Login* link opens up the Welcome page (Fig 11).

State Bo 2011-F Con Annapolis, ((410) 260-:	Dard of Law Examiners nmerce Park Drive Maryland 21401 3640			
	Welcome dvhdf	dh gfghf		
🛙 My Status 🛛 🖉 My Accoun	t 😺 My Application			
	Bar Application Status		Viewing page 1 of 3	
Eligibility	Account Created		A Martin Constraint Constraint Constraint	
Character & Fitness	Initial Character and fitness	.		
	Examination			
Petition	You do not have a valid petition to show			
Laptop (Exam Soft)	You do not have a valid petition to show	6		

Fig 12 – Welcome page

The Welcome page display 3 tabs namely, My Status, My Account, My Application.

MY STATUS TAB

The My Status tab displays the current status of your application

Within this area and at anytime during your application process you can print your Eligibility, your Character and Fitness and your petition, note also the status for each process, within this example you can see the Character and Fitness states "Application Incomplete" this area is dynamic and will change as you advance through your application process.

To check to see how complete your online application looks, you may click on the printer icon to the right at anytime during the petition process, this will open up a PDF format document, if you do not have a PDF reader installed on your PC you can download this viewer for free, from this location: <u>http://get.adobe.com/reader/</u>

When you have completed all areas, you will need to print each part in turn and submit these along with all accompanying documentation to the State Board of Law Examiners.

State Board of Law Exami 2011-F Commerce Park Drive Annapolis, Maryland 21401 (410) 260-3640	ners		
	Welcome Test	3 Rocco	
My Status 👌 My Account 📮 My Application 📮 Form	ns		
Bar Ap	plication Status		
(Part I) Eligibility	Account Created	8	
(Part II) Character & Fitness	Application Incomplete		
Ex	amination		
Petition	Petition Incomplete	4	
Laptop (Exam Soft)	Not Requested		
Test Accompdations	Requested		

THE MY ACCOUNT TAB

Clicking the *My Account* tab reveals the details of your account.

	······································					
y Status 🛯 🏷 My Account 🛛 🐼 My A	Application					
		6				
* 6-14						
Email Address(User Name)	sathyanarayanan d@gmail.com					
Current User's Deserved *	(You should aske your assessed to undate any thing on your profile)					
Current Oser's Password	(Tou should enter your password to update any thing on your prome)					
New Password	(It should have minimum 8 characters and have at least one of each - a letter, a number and a special character en 「@まち%系)					
Confirm Password	(Must match the password that you have entered above)					
Salutation	Mr.					
First Name	dvhdfdh					
Middle Name	dfhdf					
Last Name	gfghf					
Suffix						
Gender :	Male					
Date of Birth (mm/dd/yyyy)	12/02/1980					
Social Security Number Last four digits	7567					
	Place Of Birth					
Country	US					
State	hydfu					
City	trturutr					
	Mailing Address					
Country *	US					
Address *	utru					
	tryutru					
County	trutru					
City *	trutr					
State *	utru					
Zip *	7878					
Perman	ent Address Check If you like to use your Mailing Address as Permanent Address					
Addross *						
Aug 255	tranta					
Country						
City *	trute					
State *						
Zin *	rt474					
Security Ouestion *	Mother Maiden Name					
Answer *	dfhdfh					
Hint *	dhfhdfd					
Residence Phone *	59589					
Office Phone *	5958989					
C-II Dhana						

Fig 13 – Update Account

The *Email Address (User Name)* field will be pre-populated with the email address that you provided when you created your account.

Note: Fields with asterisks are mandatory, and you will see these throughout this application process.

Current User's Password - This is a mandatory field. And you will be required to enter your password if you need to update your profile.

New Password: If you need to change your existing password, enter a new password. The new password should have minimum of eight characters and must contain at least a letter, a number, any of these special characters !, @, #, \$, %, &.

Confirm password: Re enter the new password and it should match the password that was entered in the above field.

Salutation, First Name, Middle Name, Last Name Suffix, Gender, Date of Birth, Social Security Number, Country, State, City- These fields will be automatically populated as per the information entered by you while the account was created

Country- Enter the name of the country to which the mails are to be sent.

Address- Enter the mailing address in the two fields provided.

County- Enter the name of your county, if you are not in a county then leave blank.

City- Enter the name of your city.

State- Enter the name of the State.

Zip- Enter the Zip or post code in this field.

Enter the details of your permanent address. Click the check box if you would like to use the Permanent Address as your Mailing Address as.

If your Permanent Address is different from the Mailing Address, enter the details as per the following instructions.

Country- Enter the name of the country where you permanently reside.

Address- Enter the permanent address in the two fields provided.

County- Enter the name of the county.

City- Enter the name of the city.

State- Enter the name of the State.

Zip- Enter the Zip code in this field.

Security Question- This field provides several questions in the drop down box. Click the drop down to select a question of your choice.

Answer- Enter the answer for the question you have selected in the above field.

Hint- Enter a clue of the answer to help recollect your answer.

Residence Phone- Enter the number of your residence phone.

Office Phone- Enter the number of your office phone.

Cell Phone- Enter your cell phone number.

Note: The number format for each Phone, you should not add spaces or dashes.

Once the details have been entered, click **Update Account** (Fig 13a) to update your profile.

Security Question *	Mother Maiden Name 💌
Answer *	maiden name
Hint *	maiden nar
Home Phone *	8001111111
Office Phone * •	8002222222
Cell Phone	8003333333

OUpdate Account

Fig 13a – Update Account

CREATE A NEW APPLICATION

Fig 13b shows the screen you will see on your first login to your account; note that your account has been created (Eligibility) and your Character & Fitness states that you must create a new application, to continue the online process you should click on the Create New Application.

From your main login screen clicking on the My Status tab will always bring you to the Bar Application Status screen, you should check this regularly during the process because this screen is dynamic and will be updated by the State Board of Law Examiners when you

	Bar Application Status
(Part I) Eligibility	Account Created
(Part II) Character & Fitness	Create New Application
	Examination
Petition	You do not have a valid petition to show
Laptop (Exam Soft)	You do not have a valid petition to show
Test Accomodations	You do not have a valid petition to show

Fig 13b – Create New Application

MY APPLICATION TAB

Clicking the *My Application* tab displays the *Application Checklist* and the *Submission Checklist*. The Application Checklist has the following three sections:

- Instructions & Help
- Part I
- Part II

		Part I
\bigcirc	College Education	
		Part II
0	Personal Identification	
\bigcirc	Marital History	
0	Court Ordered Spousal Or Child Support	
٢	Residential History	
0	Educational History	
0	Armed Forces Details	
0	Credit History	
0	Legal Proceeding History (Civil)	
0	Legal Proceeding History (Criminal)	
0	Bond History	
0	Employment History	
٢	Mental Health/Addiction History	
0	Personal Reference	
0	Admission to Any State Bar	
0	Petition to sit for Maryland Bar Exam(ORIGINAL)	
٢	Request for use of Laptop	
0	Request For Special Accomodations	
0	Submit Application	
0	Submit Petition	

INSTRUCTIONS & HELP

- General Instructions Clicking on the General Instructions link will open a new window displaying the instructions to be followed while applying for Admission to the Bar of Maryland.
- Maryland Bar Rules of Professional Conduct Clicking this link will open a new window enabling you to view the Maryland Bar Rules of Professional Conduct.

PART I

College Education – Click this link to view the Part I of your Application for Admission to the Bar of Maryland. The application begins with a notice to the applicant providing general instructions to be followed while filling up the application. The application has four parts. They are Full name, Mailing address, Permanent address, and Place of Birth. The fields against Full Name, Mailing Address, Permanent Address and Place of Birth will be populated automatically.

Click the link *I began the study of law or will begin the study of law at.* Select your college from the drop down list provided against this label. If the name of your college is not listed in the drop down, select **Others**.

Click the link *I completed or will complete the study of law in the month of (mm/yy).* Click the *calendar* icon and a drop down displaying the month and year appears. Select the month and the year as applicable from the drop down. Once these parameters are selected, click the **x** mark or click the **Select & Close** link.

The following fields Gender, Date of Birth, Country, State, and City will also be populated automatically.

Once completed, click Save Application

Move to Part II of the application by clicking the Next Page link (Fig 14).

🛚 му	/ Status	🐉 My Account	🐺 My Application	on la			
				0 ;	Help		
	APPLICATION FOR ADMISSION TO THE BAR OF MARYLAND						
	Part I						
	COLLEG	E EDUCATION (P	PRE-LEGAL)				
	NOTICE T	D APPLICANT: TH ATE ACADEMIA OFF	E PRE-LEGAL CERTFICA	ICATION THAT PRINTS AT THE COMPLETION OF THIS APPLICATION MUST BE EXECUTED BY ED TO THE BOARD.	THE		
	If the app institution	licant has attended which possesses of	d more than one schoo fficial records of all the a	ool, this Part I should be completed by the institution from which the applicant graduated or b le applicant's earned college credits.	y the		
	This Part I	and the Part II (C	haracter QUESTIONNAIR	AIRE) and release must be filed together with the proper fee by the applicable filing deadline date			
	Save Application						
	* Fileds are mandatory						
	To the Ho	norable, the Court	of Appeals of Maryland:	nd:	age		
	I hereby apply for admission to the Maryland bar and in support of my application give the following information:						
	First Nam	e		Santharam			
	Middle Na	me		A			
	Last Nam	e		Balakrishnan			
				Mailing Address			
	Country			US			
	Address			Some address			
	Address						
	County			US			

Fig 14 – Next page

The Part II of the application has the following links which you must complete:

- Personal Identification
- Marital History
- Court Ordered Spousal Or Child Support
- Residential History
- Educational History
- Armed Forces Details
- Credit History
- Legal Proceeding History (Civil)
- Legal Proceeding History (Criminal)
- Bond History
- Employment History
- Mental Health/Addiction History
- Personal Reference
- Admission to Any State Bar
- Petition to sit for Maryland Bar Exam (ORIGINAL)
- Request for use of Laptop
- Request For Special Accommodations
- Submit Application
- Submit Petition

PERSONAL IDENTIFICATION

This page begins with instructions that the applicant should follow for personal identification.

The First Name, Middle Name and the Last Name fields will be automatically populated.

The next part of the application is *Name as you wish it to appear on your Certificate of Admission* where you need to fill in the name the way you would want it to appear on your certificate.

Name as you wish it to appear on your Certificate of Admission.						
First Name *	Allan					
Middle Name	Herbert					
Last Name *	Williamson					
Gender :	Male					
Social Security Number (Last four digits)	5551					

The Gender and the Social Security number fields will be automatically populated.

The next field is *Have you ever used or been known by any other name* Click the radio button *Yes* or *No* as applicable.

If Yes, state in full each name used or by which you have at any time been known and the reason for each such name. If your name has ever been changed, list each former name and when and how change was made. If the name currently used was adopted incident to a marriage, divorce, or other legal proceedings, attach a certified copy of each marriage certificate, divorce decree, court order or other proper document of change.

LIST OF KNOWN NAMES

List of Known Names: To enter the list of names by which you were known, click the

Add Details link (Fig 15)

List of Known names	Tom s Lar Tom s Lar GG P Varg
	Mana Address
Country	US

Fig 15 – Add Details

Clicking the Add Details button opens a Add Known Name Details window (Fig 16).

List of Known names			Tom s Lar Tom s Lar GG P Varg	ils	Remove Details	
		Add K	(nown Nam	e Details		X
			Fu	illName		
	First Name *					
	Middle Name *					
	Last Name *					
	Used From *	17-				
	Used to *					
	Reason *					
			©Sav	e Details		

Fig 16 – Add Known Name Details

You must enter your known *First Name, Middle Name* and the *Last Name* here. All the fields in this window are mandatory. To enter the date from which you have been using the name, click the calendar icon adjacent to the *Used From* field. This will provide dropdowns of Month and Year for you to choose from (Fig 17).

List of Known names	i			To To GG	m s Lar m s Lar P Varg				
				0	Add Deta	ails		Remove D	etails
			Add K	(no	wn Nam	ie Det	tails		X
					F	ullName	•		
	First Name *	2G							
	Middle Name *	GG							
	Last Name *	Zizi							
	Used From *		1 January	~	19	09 🗸	x		
	Used to *		January		e				
	Reason *		March						
			May		Sav	e Det	ails		
			June July	ý	Maili	ng Addr	ess		
Country			August						
Address			October November	er •	ne addres:	5			

Fig 17 – Select Month / Year

Once the Month and Year have been entered, click **Select & Close** or click the '**x**' marked button against the Year drop down to close the window (Fig 18).

1	Add Known Name Details
	FullName
First Name *	2G -
Middle Name *	GG
Last Name *	Zizi
Used From *	
Used to *	Select & close
Reason *	
	Save Details

Fig 18 – Select & Close

Now the month and the year will be displayed in the *Used From* field. Repeat the same process to enter the *Used to* field.

Enter the reason why you were known by these names in the *Reason* field.

Once done, click the Save Details button (Fig 19).

1	Add Known Name Details	X
	FullName	
First Name *	2G	
Middle Name *	GG	
Last Name *	Zizi	
Used From *	2/1911	
Used to *	5/1909	
Reason *	Since I was involved in a legal proceeding that involved my family members.	
	Save Details	

Fig 19 – Save Details

To remove the details that you had entered, select the name from the *List of Known names* field (fig 20) and then click the *Remove Details* (Fig 20) button.

List of Known names	GG P Varg	
	OAdd Details	Remove Details

Fig 20 – Select the name to be removed

	Mailing Address	0
	QAdd Details	Remove Details)
List of Known names	GG P Varg	
	Tom s Lar	
	Tom s Lar	

Fig 21- Click the Remove Details button

The next portion of the application deals with the Mailing Address and it will be populated already based on the information provided earlier. The same will be the case with the Permanent Address.

APPELLATE CIRCUIT ASSIGNMENT

Appellate Circuit Assignment: Check the box against the Appellate Circuit Assignment if you wish your permanent address to be the basis for assignment of your file because the Appellate Circuit assignment (interview location) is made based on mailing address. (Refer to location of Appellate Circuits.)

Appellate Circuit Assignment:			
The Appellate Circuit assignment (interview location) is made based on mailing address. Check this box if you wish your permanent address to be basis for assignment of you file. (Refer to location of Appellate circuits.)			
Residence Phone	sdfsdfs		
Office Phone	sdfsdf		

The Residence Phone, Office Phone, Cell Phone, User Name fields will be pre-populated.

Driving License – Click the radio button to select whether you possess a Driving License or not. Please note that you need to attach a certified copy of your entire driving history from the motor vehicle authority for each jurisdiction in which you held a driver's license at any time during the past three years. Since many jurisdictions issue a limited history unless specifically asked to do otherwise, you should take whatever steps are required to obtain a complete driving history.

State: Enter the name of the State from where the driving license was obtained.

License number: Enter the Driving License Number.

Describe any restrictions on license: Describe in this field, restrictions imposed on your driving license, if any.

Date of Birth (mm/dd/yyyy): This field will be pre-populated.

Place of Birth: The Country, State, City attributes will be pre populated.

Are you a citizen of United States: Click the radio button to answer Yes or No radio button as appropriate

Fig 22 - Appellate Circuit Assignment

If No what is your Immigration Status: If you are not an American citizen, describe the status of your immigration in this field.

Please provide parental details: Provide the *Full Name, Address, City, State, Zip* and the *Country* details of your father and mother against each field.

Once done, click the **Save Application** button to save all the details.

MARITAL HISTORY

			Logout
State Bo	oard of Law Examiners		
E)			
2011-F Con	nmerce Park Drive		
Annapolis,	Maryland 21401		
(410) 200	5040		
	Welcome S	antharam Balakrishnan	
	And and an other statements		
Status 🖉 My Account	t 🦉 My Application		
			() Help
	APPLICATION FOR ADM	ISSION TO THE BAR OF MARYLAN	ID
		Dart II	
		Parti	
Marital History			
NOTICE TO APPLICANT: Ple	ease complete the application, Attach all n	ecessary required documents, Print sign	and make oath to this form,
This Application will not be character committee.	considered complete until the certificates,	confirmation, and letters of references	required are received for processing by the
Previous Page		Save Application	Next Page
* Fileds are mandatory			
	CONTRACTOR CONTRACTOR		
Are you now or have you e	ver been married*		Yes 🕙 No 🔾
Are you now or have you e	ver been married*	Spouse2	Yes 🛈 No 🔿
Are you now or have you e	ver been married*	Spouse2 Spouse2 Spouse2	Yes 🛈 No 🔿
Are you now or have you e If so, state the details	ver been married*	Spouse2 Spouse2 Spouse2	Yes 🔍 No 🔿
Are you now or have you e If so, state the details	ver been married*	Spouse2 Spouse2 Spouse2	Yes [©] № ^O
Are you now or have you e If so, state the details	ver been married*	Spouse2 Spouse2 Spouse2	Yes ⊙ No O ©Remove Details
Are you now or have you e If so, state the details	Marital Details	Spouse2 Spouse2 Spouse2	Yes [©] № ^O ©Remove Details
Are you now or have you e If so, state the details	Marital Details Spouse Name Prior to Marriage *	Spouse2 Spouse2 Spouse2	Yes [©] № ^O
Are you now or have you e If so, state the details	Marital Details Spouse Name Prior to Marriage * Marriage Date * mm/dd/yyyy	Spouse2 Spouse2 Spouse2 CAdd Details	Yes [©] No ^O ©Remove Details
Are you now or have you e	Marital Details Spouse Name Prior to Marriage * Marriage Date * mm/dd/yyyy Place of marriage	Spouse2 Spouse2 Spouse2	Yes [©] № ^O
Are you now or have you e	Marital Details Spouse Name Prior to Marriage * Marriage Date * mm/dd/yyyy Place of marriage City *	Spouse2 Spouse2 Spouse2 CAdd Details	Yes [©] No ^O ©Remove Details
Are you now or have you e	Marital Details Spouse Name Prior to Marriage * Marriage Date * mm/dd/yyyy Place of marriage City * State *	Spouse2 Spouse2 Spouse2	Yes © No O
Are you now or have you e	Marital Details Spouse Name Prior to Marriage Marriage Date * mm/dd/yyyy Place of marriage City * State * Zip *	Spouse2 Spouse2 Spouse2	Yes O No O
Are you now or have you e	Marital Details Spouse Name Prior to Marriage Marriage Date * mm/dd/yyyy Place of marriage City * State * Zip * Country *	Spouse2 Spouse2 Spouse2 Add Details	Yes [©] No ^O
Are you now or have you e	Marital Details Spouse Name Prior to Marriage * Marriage Date * mm/dd/yyyy Place of marriage City * State * Zip * Country *	Spouse2 Spouse2 Spouse2 Add Details	Yes [©] No ^O
Are you now or have you e If so, state the details Have you ever been divort	Marital Details Spouse Name Prior to Marriage * Marriage Date * mm/dd/yyyy Place of marriage City * State * Zip * Country *	Spouse2 Spouse2 Spouse2 Add Details	Yes ⊙ No O
Are you now or have you e If so, state the details Have you ever been divord If yes, you should provide	Marital Details Spouse Name Prior to Marriage * Marriage Date * mm/dd/yyyy Place of marriage City * State * Zip * Country *	Spouse2 Spouse2 Spouse2 Add Details	Yes ⊙ No O
Are you now or have you a If so, state the details Have you ever been divord If yes, you should provide Do you currently have a di	Marital Details Spouse Name Prior to Marriage Marriage Date * mm/dd/yyyy Place of marriage City * State * Zip * Country * @ red* the details in the "Legal Proceedings Hist vorce pending*	Spouse2 Spouse2 Spouse2 Spouse2 Source Details	Yes ⊙ No O SRemove Details Yes ⊙ No O Yes ⊙ No O
Are you now or have you a If so, state the details Have you ever been divord If yes, you should provide Do you currently have a di If yes, you should provide	Marital Details Spouse Name Prior to Marriage * Marriage Date * mm/dd/yyyy Place of marriage City * State * Zip * Country * wred* the details in the "Legal Proceedings Hist vorce pending* the details in the "Legal Proceedings Hist	Spouse2 Spouse2 Spouse2 Spouse2 Spouse2 Spouse2 Save Details Save Details Save Details	Yes ⊙ No O CRemove Details Yes ⊙ No O Yes ⊙ No O tails
Are you now or have you a If so, state the details Have you ever been divord If yes, you should provide Do you currently have a di If yes, you should provide Have you had a marriage a	Marital Details Spouse Name Prior to Marriage * Marriage Date * mm/dd/yyyy Place of marriage City * State * Zip * Country *	Spouse2 Spouse2 Spouse2 Add Details	Yes ⊙ No O ©Remove Details Yes ⊙ No O Yes ⊙ No O tails Yes ⊙ No O

Fig 23 - Marital History page

Note for the applicant: Applicants need to complete the application, attach all necessary documents, print sign and make oath to this form.

This Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the Character Committee.

Are you now or have you ever been married: Select Yes or No as appropriate.

If so, state the details: To add the name of your spouse in this field, click the **Add Details** link (Fig 24) to open the *Marital Details* window.

MARITAL DETAILS	S			
Previous Page		Save Application		Next Page
* Fileds are mandatory				
Are you now or have you ever	been married*			Yes 💿 No 🔿
If so, state the details		Spouse2 Spouse2 Spouse2	⊘ Remove Details	
	Marital Details	add	X	
	Spouse Name Prior to Marriage *			
	Marriage Date * mm/dd/yyyy	17.		
	Place of marriage			
	City *			
	State *			
	Zip *			
	Country *			
		Save Details		

Fig 24 - Add Details

Spouse Name Prior to Marriage: Here enter the name of your spouse prior to the marriage.

Marriage Date: Click the calendar icon to select the month, date, and year of your marriage

Place of marriage:

City: Enter the name of the city where the marriage took place.

State: Enter the name of the State where the marriage took place.

Zip: Enter the Zip code of the locality where the marriage took place.

Country: Enter the name of the country where the marriage took place.

Click the Save Details button (Fig 25) to save all the details.

	Add Details	Remove Details
		×
Marital Details		
Spouse Name Prior to Marriage *	Espouse Esterado	
Marriage Date * mm/dd/yyyy	Tue Dec 01	
Place of marriage		
City *	Florence	
State *	MV	
Zip *	52448	
Country *	Spain	
C	Save Details	
	40	

Figure 25 – Save Details

To remove a name that you entered in the *If so, state the details* field, click on the name and then click the **Remove Details** button (Fig 26). The name will be removed from the list.

Previous Page	Save Application	Next Page
* Fileds are mandatory		
Are you now or have you ever been married*		Yes 💿 No 🔿
If so, state the details	Spouse2 Spouse2 OAdd Details	⊜Remove_Details
Have you ever been divorced*		70

Fig 26 – Remove details

Have you ever been divorced: Click the radio button to select *Yes* or *No.* If your answer is Yes, you need to provide the details in the "Legal Proceedings History (CIVIL)" under *Divorced Details*.

Have you ever been divorced*	Yes 💿 No 🔿
If yes, you should provide the details in the "Legal Proceedings History(CIVI	L)" - under Divorced Details
Do you currently have a divorce pending*	Yes 💿 No 🔿
If yes, you should provide the details in the "Legal Proceedings History(CIVI	L)" - under Divorce Pending Details
Have you had a marriage annulled*	Yes 💿 No 🔿
If yes, you should provide the details in the "Legal Proceedings History(CIVI	L)" - under Annulled Marriage Details
♦Previous Page ©Sav	e Application Next Page

Do you currently have a divorce pending: Click the radio button *Yes* or *No* to select the appropriate answer. If your answer is Yes, you need to provide the details in the "Legal Proceedings History (CIVIL)" under *Divorce Pending Details*.

Have you had a marriage annulled: Click the radio button Yes or No to select the appropriate answer. If your answer is Yes, you will have to provide the details in the "Legal Proceedings History (CIVIL)" under Annulled Marriage Details.

Once you have completed this part of the application, click the **Save Application** button (Fig 27) to save all the information.

Previous Page	Save Application		Next Page	
* Fileds are mandatory				
Are you now or have you ever been married*			Yes 💿 No 🔿	
If so, state the details	Spouse2 Spouse2			
	OAdd Details	Remove Details		
Have you ever been divorced*			Yes 💿 No 🔿	
If yes, you should provide the details in the "Legal Proceedings History(CIVIL)" - under Divorced Details				
Do you currently have a divorce pending*			Yes 💿 No 🔿	
If yes, you should provide the details in the "Legal Proceedings Hist	tory(CIVIL)" - under Divorce Pending	Details		
Have you had a marriage annulled*			Yes 💿 No 🔿	
If yes, you should provide the details in the "Legal Proceedings Hist	tory(CIVIL)" - under Annulled Marriag	je Details		
Previous Page	©Save Application		Next Page	

Fig 27 – Save Application

Click the Next Page link (Fig 28) to go to the next application.

♦ Previous Page	Save Application	Next Page		
* Fileds are mandatory		(th)		
Are you now or have you ever been married*		Yes 💿 No 🔿		
If so, state the details	Spouse2 Spouse2			
	Add Details	Remove Details		
Have you ever been divorced*		Yes 💿 No 🔿		
If yes, you should provide the details in the "Legal Proceedings History(CIVIL)" - under Divorced Details				
Do you currently have a divorce pending*		Yes 💿 No 🔿		
If yes, you should provide the details in the "Legal Proceedings History(CIVIL)" - under Divorce Pending Details				
Have you had a marriage annulled*		Yes 💿 No 🔿		
If yes, you should provide the details in the "Legal Proceedings History(CIVIL)" - under Annulled Marriage Details				
	Save Application	▶ NextiRage		

Fig 28 – Next Page
COURT ORDERED SPOUSAL OR CHILD SUPPORT

The Court Ordered Spousal or Child Support details page (Fig 29).

🍕 My Status 🔌 My Account 😺 My Application			
			🔞 Help
APPLICATION FOR ADM	MISSION TO THE BAR OF MAR	YLAND	
	Part II		
Spousal or Child Support Details			
NOTICE TO APPLICANT: Please complete the application, Attach all r	necessary required documents, Prin	t sign and make oath to this fo	orm.
This Application will not be considered complete until the certificates character committee.	s, confirmation, and letters of refere	ences required are received for	processing by the
Previous Page	Save Application		Next Page
* Fileds are mandatory			
Are you presently obligated to pay court ordered spousal support*			Yes 🔿 No 💿
Please provide a copy of the court order(s) requiring the support p	ayment		
If so, state the details	12/01/2009 12/01/2009 12/01/2009 05/11/2009	Remove Details	
Are you presently obligated to pay court ordered child support*			Yes O No 💿
Please provide a copy of the court order(s) requiring the support pa	ayment		
If so, state the details	12/01/2009 03/10/2009	©Remove Details	
	Save Application		Next Page

Fig 29 - Court Ordered Spousal or Child Support details page

This page has the following queries:

Are you presently obligated to pay court ordered spousal support: Click the radio button Yes or No to select the appropriate answer. If your answer is Yes, you need to provide a copy of the court order(s) requiring the support payment.

If so, state the details: You need to enter the Court Order Date in this field. In order to enter the date, click the **Add Details** button (Fig 30). This opens to the *Support Details* window.

If so, state the details	1 0 1	2/01/2009 5/11/2009 1/30/2008	
		Add Details	Remove Details
		(***) 	×
	Support Details	add	
	For *	Spouse	*
	Court Order Date *		17.
	Support Payment Frequency *	Daily	×
	Amount *	0.0	
	Date of last Payment *		12.
	Are you presently in compliance with the or	der *	Yes O No O
	Are you now or have you ever been in arrea on the payment of this court ordered supp payment *	rage port	Yes O No O
	If yes and the arrearage remains unpaid, pro	vide a copy of the court of	order(s).
	Provide the amount of your arrearage, in eac off the arrearage. If you have paid the arrea and provide the date that pa	ch case and describe you rage, state the amount ayment was completed.	r plan for paying of the arrearage
	©Save D	etails	

Fig 30 –Add Details

	×
Support Details	
For *	Please Select 💙
Court Order Date *	Please Select Spouse
Support Payment Frequency *	Daily V
Amount *	0.0
Date of last Payment *	12
Are you presently in compliance with the order $\ensuremath{^*}$	Yes O No O
Are you now or have you ever been in arrearage on the payment of this court ordered support payment *	Yes O No O
If yes and the arrearage remains unpaid, provide a	copy of the court order(s).
Provide the amount of your arrearage, in each case off the arrearage. If you have paid the arrearage, and provide the date that paymen	e and describe your plan for paying state the amount of the arrearage it was completed.
Save Details	\$

Fig 31- Support details labels

For: Select as appropriate from the drop down list.

Court Order Date: Select the date by clicking the Calendar icon (Fig 32) against the field.

						x		
Support Details								
For *	Ple	ase	Select	🗸				
Court Order Date *	[
Support Payment Frequency *			Dec	N	✓ 20	009	*	
Amount *		Su	Мо	Tu	We	Th	Fr	Sa
Date of last Payment *				1	2	3	4	5
Are you presently in compliance with the order *		6	7	8	9	10	11	12
Are you now or have you ever been in arrearage on the payment of this court ordered support payment *		13	14	15	16	17	18	19
If yes and the arrearage remains unpaid, provide a	copy of th	20	21	22	23	24	25	26
Provide the amount of your arrearage, in each case off the arrearage. If you have paid the arrearage, s and provide the date that payment	and desc tate the a t was com	mour	it of t d.	49 he ar	reara	ge		
Save Details					~			

Fig 32 - Calendar

Select the month from the month drop down list and select the year from the year drop down list. Click the appropriate date and the field will be populated accordingly.

Support Payment Frequency- Select the support payment frequency by clicking the drop down list to choose from Daily, Weekly or Monthly (Fig 33).

	×
Support Details	
For *	Please Select 💙
Court Order Date *	
Support Payment Frequency *	Daily 💌
Amount *	Daily Weekly
Date of last Payment *	Monthly
Are you presently in compliance with the order $\boldsymbol{*}$	Yes O No O
Are you now or have you ever been in arrearage on the payment of this court ordered support payment *	Yes O No O
If yes and the arrearage remains unpaid, provide a	copy of the court order(s).
Provide the amount of your arrearage, in each case off the arrearage. If you have paid the arrearage, and provide the date that paymen	e and describe your plan for paying state the amount of the arrearage it was completed.
Save Details	i

Fig 33- Payment frequency

Amount: Enter the amount of money that you need to give as support to your spouse or child in this field.

Date of last payment: Enter the date of your last payment as support by clicking the calendar icon. To select the date, month and year from the calendar, repeat the same process as you did in *Court Order Date* field.

Are you presently in compliance with the order: Click the appropriate Yes or No radio button.

Are you now or have you ever been in arrearage on the payment of this court ordered support payment: Click the appropriate Yes or No radio button.

If yes and the arrearage remain unpaid, provide a copy of the court order(s): If there are any arrears pending you need to provide a copy of the court order(s).

Provide the amount of your arrearage in each case and describe your plan for paying off the arrearage. If you have paid the arrearage, state the amount of the arrearage and provide the date that payment was completed: The field below this label needs to be filled as per the instructions given above.

	×
Support Details	
For *	Please Select 💙
Court Order Date *	17.
Support Payment Frequency *	Daily 💙
Amount *	0.0
Date of last Payment *	17
Are you presently in compliance with the order *	Yes O No O
Are you now or have you ever been in arrearage on the payment of this court ordered support payment *	Yes O No O
If yes and the arrearage remains unpaid, provide a	copy of the court order(s).
Provide the amount of your arrearage, in each case off the arrearage. If you have paid the arrearage, and provide the date that paymen	e and describe your plan for paying state the amount of the arrearage it was completed.
Case 2= \$ 500 Case 5 = \$ 200 Weekly Payment	×
Save Details	;
40	

Click Save Details after entering all the information (Fig 34).

Fig 34 – Save Details

	Weld	come Santharam Balakrishnan	
y Status 🔌 My	Account 🐺 My Application		
			😮 Help
	APPLICATION FO	R ADMISSION TO THE BAR OF MARYLAND	
		Part II	
NOTICE TO APPLIC	ANT: Please complete the application, Attac	h all necessary required documents, Print sign and make oath t	to this form.
NOTICE TO APPLIC This Application wil character committe	ANT: Please complete the application, Attac I not be considered complete until the cert e.	h all necessary required documents, Print sign and make oath t ificates, confirmation, and letters of references required are re	to this form. ceived for processing by the
NOTICE TO APPLIC This Application wil character committe	ANT: Please complete the application, Attac I not be considered complete until the cert e. IP	h all necessary required documents, Print sign and make oath t ificates, confirmation, and letters of references required are re	o this form. ceived for processing by the Next Page
NOTICE TO APPLIC This Application wil character committe Previous Pag Fileds are manda	ANT: Please complete the application, Attac not be considered complete until the cert e. Je story	h all necessary required documents, Print sign and make oath t ificates, confirmation, and letters of references required are re	o this form. ceived for processing by the Next Page
NOTICE TO APPLIC This Application wil character committe Previous Pag Fileds are mande The following cons	ANT: Please complete the application, Attac not be considered complete until the cert e. P story titutes every residence, address and place	h all necessary required documents, Print sign and make oath t ficates, confirmation, and letters of references required are re with zip code where I have lived within the last ten years	o this form. ceived for processing by the Next Page
NOTICE TO APPLIC This Application will character committe Previous Pag Fileds are mand: The following cons Details *	ANT: Please complete the application, Attact I not be considered complete until the cert e. Interpolation Interpol	h all necessary required documents, Print sign and make oath t ificates, confirmation, and letters of references required are re with zip code where I have lived within the last ten years	o this form. ceived for processing by the Next Page
NOTICE TO APPLIC This Application wil character committe Previous Pag Fileds are mandi The following cons Details *	ANT: Please complete the application, Attact I not be considered complete until the cert e. Ide atory titutes every residence, address and place asdasd sdcvdf County @Add Details	h all necessary required documents, Print sign and make oath t ificates, confirmation, and letters of references required are re with zip code where I have lived within the last ten years ©Remove Details	o this form. ceived for processing by the Next Page

The *Residential History* page begins with a note to the applicant.

The applicant is required to complete the application form, attach all necessary documents, print sign and make oath to this form. The Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the Character Committee.

Details: Enter your residential details for the past ten years in chronological order in this field.

Click Add Details (Fig 35) to populate the details field.

OAdd Details	Remove Details
(***) []	×
Residence Details	
From *	12
То *	
Address *	
County	
City *	
State *	
Zip *	
Country *	
Reason for Move *	
	Save Details

Fig 35 – Add Details

From: Use the Calendar icon to enter the date from which you had been residing at a particular location.

To: Similarly use the Calendar icon to enter the date till which you resided in that location.

Address: Enter address details of that location in the space provided.

County: Enter the name of the county where that place is located.

City: Enter the name of the city where that place is located.

State: Enter the name of the State where that place is located.

Zip- Enter the zip code of the locality.

Country: Enter the name of the country where that place is located.

Reason for Move: Provide the reason for moving out from that locality.

Once done, click the Save Details button.

Click the **Add Details** button and repeat the process to enter the address details of the next residential location. Continue until you have chronologically entered the residential details for the past ten years.

To remove any information from the *Details* field, select the item and click the **Remove Details** link.

Click the **Next Page** link at the bottom right corner to move to the next application.

EDUCATIONAL HISTORY/ACADEMIC HISTORY

This page too opens with a note to the prospective applicant. The applicant is required to complete the application form, attach all necessary documents, print, sign and make oath to the form. The application form will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the Character Committee.

My education was received as follows:

High School:

High School: To populate this field click the **Add Details** link. This opens the *Academic Details* window with the following fields:

Acadomic History		
Academic History		
NOTICE TO APPLICANT: Please complete the application, Attach al	necessary required documents, Print sign and make oath to this form.	
NOTE: Applicants are responsible for completing the top half of Application. This Application will not be considered complete until the	a Request for Certification form for each school identified. Forms have been provided with the certificates, confirmation, and letters of references required are received for processing by the second se	his Application and must be filed with the completed e character committee.
Previous Page	Save Application	Next Page
* Fileds are mandatory		
My education was received as follows		
High School *	High School 1	move Details

Type: Select from the drop down, the type of institution where you have studied. The drop down is populated with the *High School College / University Undergraduate College / University Graduate Law School*

		X
Academic Detail	; 	
Type *	High School	
Name Used *	Allan Herbert Jones	
School Name *		
Address *		
City *		
State *		
Zip *		
Country *		
From *		
То *		
Graduated *		Yes C No C
Degree Received		
Date Graduated		
	Save Details	

Name Used: Enter your name as maintained in the institution's records.

School Name: Enter the name of your school in this field.

Address: Enter the address of your school here.

City: Enter the name of the city where the school is situated.

State: Enter the name of the State where the school is situated.

Zip: Enter the zip code of the locality.

Country: Enter the name of the country.

From: Use the Calendar to enter the date on which you commenced your studies at this institution.

To: Use the Calendar to enter the date on which you completed your studies at this institution.

Graduated: Click the radio button *Yes* or *No* as applicable.

Degree Received: Enter the name of the Degree that you received from this institution.

Date Graduated: Use the Calendar to enter the date on which you graduated.

Click the *Save Details* button to save the details that you have entered.

College or University Undergraduate:

College or University Undergraduate: To populate this field by click the *Add Details* link. This opens the *Academic Details* window with the following fields:

College or University Undergraduate *	Coll 2 A Coll 1	
	OAdd Details	Remove Details

Type: Select from the drop down, the type of institution where you studied. The drop down is populated with *High School, College / University Undergraduate, College / University Graduate, Law School*

		X
Academic Detail	5	
Type *	College/University Undergraduate 🔹	
Name Used *	Allan Herbert Jones	
School Name *		
Address *		
City *		
State *		
Zip *		
Country *		
From *		
То *		
Graduated *	Yes O	No O
Degree Received		
Date Graduated		
	Save Details	

Name Used: Enter your name as maintained in the institution's records.

School Name: Enter the name of the institution here.

Address: Enter the address of the institution here.

City: Enter the name of the city where the institution is situated.

State: Enter the name of the State where the institution is situated.

Zip: Enter the zip code of the locality.

Country: Enter the name of the country.

From: Use the Calendar to enter the date on which you commenced your studies at this institution.

To: Use the Calendar to enter the date on which you completed your studies at this institution.

Graduated: Click the radio button *Yes* or *No* as applicable.

Degree Received: Enter the name of the Degree that you received from this institution.

Date Graduated: Use the Calendar to enter the graduation date.

Click the **Save Details** button to save the details that you entered.

To remove the details that you have entered, select the name from the *College or University Graduate* field and then click the **Remove Details** button. The name will be deleted.

College or University Graduate School:

College or University Graduate School: To populate the field click the **Add Details** link. This link opens the *Academic Details* window with the following fields:

	Grad School 🔺
College or University Graduate School *	
	_
	OAdd Details

Type: Select from the drop down, the type of institution where you studied. The drop down is populated with the *High School, College / University Undergraduate, College / University Graduate, Law School*

		×
Academic Details	5	
Type *	College/University Graduate	
Name Used *	Allan Herbert Jones	
School Name *		
Address *		
City *		
State *		
Zip *		
Country *		
From *		
To *		
Graduated *	Ye	s O _{No} O
Degree Received		
Date Graduated		
	Save Details	

Name Used: Enter your name as maintained in the institution's records.

School Name: Enter the name of the institution here.

Address: Enter the address of the institution here.

City: Enter the name of the city where the institution is situated.

State: Enter the name of the State where the institution is situated.

Zip: Enter the zip code of the locality.

Country: Enter the name of the country.

From: Use the Calendar to enter the date on which you commenced your studies at this institution.

To: Use the Calendar to enter the date on which you completed your studies at this institution.

Graduated: Click the radio button Yes or No as applicable.

Degree Received: Enter the name of the Degree that you received from this institution.

Date Graduated: Use the Calendar to enter the graduation date.

Click the *Save Details* button to save the details that you have entered.

To remove the details that you entered, select the name from the *College or University Graduate School* field and then click the **Remove Details** button. The name will be deleted.

Law School:

Law School: To populate this field click the **Add Details** link. This link opens the *Academic Details* window with the following fields:



Type: Select from the drop down, the type of institution where you studied. The drop down is populated with the *High School, College/University Undergraduate, College/ University Graduate, Law School*

Academic Detai	5	
Type *	Law School	
Name Used *	Allan Herbert Jones	
School Name *		
Address *		
1		1
City *		
State *		
Zip *		
Country *		
From *		
To *	12	
Graduated *		Yes C No C
Degree Received		
Date Graduated		

Name Used: Enter your name as maintained in the institution's records.

School Name: Enter the name of the institution here.

Address: Enter the address of the institution here.

City: Enter the name of the city where the institution is situated.

State: Enter the name of the State where the institution is situated.

Zip: Enter the zip code of the locality.

Country: Enter the name of the country.

From: Use the Calendar to enter the date on which you commenced your studies at this institution.

To: Use the Calendar to enter the date on which you completed your studies at this institution.

Graduated: Click the radio button *Yes* or *No* as applicable.

Degree Received: Enter the name of the Degree that you received from this institution.

Date Graduated: Use the Calendar to enter the graduation date.

Click the Save Details button to save the details that you have entered.

To remove the details that you entered, select the name from the *Law School* field and then click the **Remove Details** button. The name will be deleted.

Have you ever been dropped, suspended, placed on probation, expelled or requested to resign from any school, college or university, or requested by any such school or institution to discontinue your studies therein – Click the radio button against Yes or No as applicable.

If so identify the institution, state the cause, circumstances, date and outcome of each such occurrence: Use the space provided to enter the details asked for.

Click the Save Details button to save the details that you have entered.

Click the **Next Page** link to move to the next application.

ARMED FORCES DETAILS:

This page has the following fields:

Armed Force/Selective Service Details		
NOTICE TO APPLICANT: Please complete the application, Attach	all necessary required documents, Print sign and make oath to this form.	
This Application will not be considered complete until the certifica	tes, confirmation, and letters of references required are received for processing by the character committee	e,
Previous Page	Save Application	Next Page
* Fileds are mandatory		
Have you ever served in the armed forces of the United States		Yes 🖲 No C
If the answer is yes and you are discharged attach a copy of the	document evidencing the discharge.	
Have you ever been a defendant in any court martial*		Yes 🖲 No C
If the answer is affirmative state the date, the nature of the cha	rge, the facts, disposition of the matter and the location and designation of the military establishment whe	ere such proceedings took place.
	court martial defendant details	
Have you registered for the Selective Service*		yes 🖲 No O
Date of Registration*	01/01/1990	
City and State of Registration*	Selective Svc Reg City	7
Previous Page	Save Application	Next Page

Have you ever served in the armed forces of the United States: Click the radio button against Yes or No as applicable.

If the answer is Yes and you are discharged attach a copy of the document evidencing the discharge.

Have you ever been a defendant in any court martial: Click the radio button against Yes or No as applicable.

If the answer is affirmative, state the date, the nature of the charge, the facts, disposition of the matter and the location and designation of the military establishment where such proceedings took place: Use the space provided to enter the details asked for.

Have you registered for the Selective Service: Click the radio button against Yes or No as applicable.

Date of Registration: Use the Calendar to enter your date of registration in the Armed Forces.

City and State of Registration: Enter the name of the City and the State from where you registered.

Click the **Save Application** button to save the details that you have entered.

Click the **Next Page** link to move to the next application.

	Welcome Santharam Balakrishnan		
🍕 My Status 🔌 My Account 🐺 My Ap	plication		
APPLIC	ATION FOR ADMISSION TO THE BAR OF MA	RYLAND	
	Part II		
Credit History			
NOTICE TO APPLICANT: Please complete the appl	ication, Attach all necessary required documents, Pr	rint sign and make oath	to this form.
This Application will not be considered complete u character committee.	ntil the certificates, confirmation, and letters of refe	erences required are re	ceived for processing by the
Previous Page	Save Application		Next Page
 Fileds are mandatory 			
* Fileds are mandatory During the last five years disclose all established loans, revolving credit cards and any other debt of loans, revolving credit cards and any other debt of	or maintained credit. Include secured loans, stude obligations you have had.	nt	None
 Fileds are mandatory During the last five years disclose all established loans, revolving credit cards and any other debt of Note: All disclosures, including account numbers a 	or maintained credit. Include secured loans, stude obligations you have had. are protected by a strict confidentiality rule, See Bar	nt Admission Rule 19, "Co	None 🗌
 Fileds are mandatory During the last five years disclose all established loans, revolving credit cards and any other debt of Note: All disclosures, including account numbers a Credit Details 	or maintained credit. Include secured loans, stude obligations you have had. Ire protected by a strict confidentiality rule, See Bar	nt Admission Rule 19, "Co Spouse wertr wrerw	None 🗌 onfidentiality".
 Fileds are mandatory During the last five years disclose all established loans, revolving credit cards and any other debt of Note: All disclosures, including account numbers a Credit Details 	or maintained credit. Include secured loans, stude obligations you have had. are protected by a strict confidentiality rule, See Bar	Admission Rule 19, "Co Spouse wertr wrerw @Add Details	None Details
* Fileds are mandatory During the last five years disclose all established loans, revolving credit cards and any other debt o Note: All disclosures, including account numbers a Credit Details I presently owe money, SOME PART OF WHICH H the following. *	or maintained credit. Include secured loans, stude obligations you have had. Ine protected by a strict confidentiality rule, See Bar MAS BEEN DELINQUENT FOR MORE THAN 90 DAYS, 1	Admission Rule 19, "Co Spouse wertr wrerw @Add Details to	None Donfidentiality". CREMOVE Details None None
* Fileds are mandatory During the last five years disclose all established loans, revolving credit cards and any other debt o Note: All disclosures, including account numbers a Credit Details I presently owe money, SOME PART OF WHICH H the following. *	or maintained credit. Include secured loans, stude obligations you have had. are protected by a strict confidentiality rule. See Bar IAS BEEN DELINQUENT FOR MORE THAN 90 DAYS, 1 quired payment when due.	Admission Rule 19, "Co Spouse wertr wrerw @Add Details	None Donfidentiality". CREMOVE Details None
 * Fileds are mandatory During the last five years disclose all established loans, revolving credit cards and any other debt of Note: All disclosures, including account numbers a Credit Details I presently owe money, SOME PART OF WHICH H the following. * "Delinquent" means that you failed to make a rec Delinquent Details 	or maintained credit. Include secured loans, stude obligations you have had. are protected by a strict confidentiality rule. See Bar IAS BEEN DELINQUENT FOR MORE THAN 90 DAYS, t guired payment when due.	Admission Rule 19, "Co Spouse wertr werw ©Add Details to 34534 ildyasdadsa asko	None onfidentiality".
 * Hields are mandatory During the last five years disclose all established loans, revolving credit cards and any other debt of Note: All disclosures, including account numbers a Credit Details I presently owe money, SOME PART OF WHICH H the following. * "Delinquent" means that you failed to make a rec Delinquent Details 	or maintained credit. Include secured loans, stude obligations you have had. are protected by a strict confidentiality rule. See Bar IAS BEEN DELINQUENT FOR MORE THAN 90 DAYS, t guired payment when due.	Admission Rule 19, "Co Spouse wertr Werw CAdd Details to 34534 ildyasdadsa asko CAdd Details	None onfidentiality". ©Remove Details None None None Ca a aki adadaa d

Fig 36 – Credit History page

NOTICE TO APPLICANT: Please complete the application. Attach all necessary documents. Print sign and make oath to this form.

This Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the Character Committee.

During the last five years disclose all established or maintained credit. Include secured loans, student loans, revolving credit cards and any other debt obligations you have had – If you have none of these, click the box next to None.

Note: All disclosures, including account numbers are protected by a strict confidentiality rule, See Bar Admission Rule 19, "Confidentiality".

Credit Details: To populate this field click the Add Details button. This opens the Credit Details page (Fig 37).

Details	
Name *	
Account Number *	
Address *	
City *	
State *	
Zip *	
Country *	

Fig 37 – Credit Details page

Name: - Enter the name in this field.

Account number – Enter your bank account number here.

- Address Enter your address in this field.
- *City* Enter the name pf your city.
- *State* Enter the name of your state.
- *Zip* Enter the zip code of your locality.
- *Country* Enter the name of your country.

Once done, click the Save Details link to save the information entered.

To remove the details entered in the *Credit Details* field, select the detail that you would like to remove and click the *Remove Details* link. The selected detail will be removed from the list.

I presently owe money, SOME PART OF WHICH HAS BEEN DELINQUENT FOR MORE THAN 90 DAYS, to the following. If this is not applicable for you, click the box next to *None.*

Delinquent Details – If you have failed to make a required payment when due, then provide the details of the same by clicking the Add Details button. Clicking this link opens the Delinquent Details page (Fig 38).

Name of Creditor – Enter the name of the Creditor.

Balance Due – Enter the balance due amount

Date Incurred – Enter the ddd/mm/yyyy on which the _____ by clicking the calendar icon. Select the date as appropriate from the calendar.

Original Amount of Debt – Enter the original amount of Debt in this field.

Address – Enter the address of residence

City – Enter the name of your city.

State – Enter the name of your State here.

Zip – Enter the zip code of your locality.

Country – Enter the name of your country.

	×	
Details		
Name of Creditor *		
Balance Due *		
Date Inccured *	172-	
Original Amount of Debt		
Address *		
City *		
State *		
Zip *		
Country *		
Save Details		

Fig 38 – Delinquent details page

Once done, click the *Save Details* link to save all the information provided. To remove the details entered in the Delinquent Details field, select the detail that you would like to remove and click the *Remove Details* link. The selected detail will be removed from the list.

Click the Next Page link to move to the next application.

EGAL PROCEED	ING HISTORY (CIVIL)		
	APPLICATION FOR ADMISSION TO THE BAR OF MAR	YLAND	
	Part II		
agal Action Datails/Civi	N		
	1)	t sign and make on	th to this form
his Application will not be co haracter committee.	nsidered complete until the certificates, confirmation, and letters of refere	ences required are r	received for processing by the
Previous Page	Save Application		Next Page
Fileds are mandatory	• II		
Divorced details		OAdd Details	⊜ Remove Details
Pending details		OAdd Details	⊘ Remove Details
Annulled Marriage details		OAdd Details	©Remove Details
Please give a complete list o guardianship and every othe	f all suits in equity, actions at law, suits in bankruptcy or other statutory in r judicial or other administrative proceeding of every nature and kind, ex	proceedings, matte cept divorce or crin	rs in probate, lunacy, ninal proceedings, to which
Legal Action List		OAdd Details	⊜ Remove Details
I have attached to this Appli unsatisfied, and listed below	cation certified copies of all judgments listed, whether satisfied or the names and present addresses (with zip codes) of the holders *		Yes () No () N/A ()
If no, describe your efforts t	o secure the docket lists or indices in each proceeding identified in above		
		<	
Previous Page	©Save Application		Next Page

Fig 39 – Legal Proceeding Detail page

NOTICE TO APPLICANT: Please complete the application, Attach all necessary required documents, Print sign and make oath to this form.

This Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the character committee.

Divorced Details – Click the Add Details button to enter the details of your divorce (Fig 40).

Divorced Spouse Name- Enter the name of divorced spouse

Case Number – Enter the Case number here

Filing Date – Enter the date on which the divorce case was filed. Click the calendar icon to select and enter the dd/mm/yyyy.

Date of Divorce – Enter the date of divorce by clicking the calendar icon to select and enter the dd/mm/yyyy.

Grounds for Divorce – Describe the grounds on which the divorce took place.

NAME AND COMPLETE ADDRESS OF COURT INVOLVED

Name of court – Enter the name of the court involved in your divorce case.

- *Court address* Enter the address of the court here.
- *City* Enter the name of the city where the court is situated.
- State Enter the name of the State.
- Zip Enter the zip code of the locality where the court is situated.
- Country Enter the name of the country where the court is situated.

vorce Details			
	Divorced Spouse Name *		
	Case Number *		
	Filing Date *		
	Date of Divorce *		
	Grounds for Divorce *		
	Name and	complete Address of court involved	
	Name of court *		
	Court Address *		
	City *		
	State *		
	Zip *		
	Country *		
	Plaintiff Details		Defendant Details
laintiff Name		Defendant Name	
Plaintiff Address *		Defendant Address *	
City *		City *	
State *		State *	
Zip *		Zip *	
Country *		Country *	
Plaintiff Attorney Name *		Defendant Attorney Name	
Plaintiff Attorney Address *		Defendant Attorney Address *	
City *		City *	
State *		State *	
Zip *		Zip *	
and an and the second			

Fig 40 – Divorce details page

PLAINTIFF DETAILS

Plaintiff Name - Enter the name of the plaintiff here.

Plaintiff Details		
Plaintiff Name *		
Plaintiff Address *		
City *		
State *		
Zip *		
Country *		
Plaintiff Attorney Name *		
Plaintiff Attorney Address *		
City *		
State *		
Zip *		
Country *		

Plaintiff Address - Provide plaintiff's address in this field

- *City* Enter the name of the city here.
- State Enter the name of the State here
- *Zip* Enter the zip code of the locality where the plaintiff's office is.
- *Country* Enter the name of the country here.
- *Plaintiff Attorney Name* Enter the name of the Plaintiff Attorney.
- Plaintiff Attorney Address Enter the address of the Plaintiff's Attorney's address.
- City Enter the name of the city where the
- State Enter the name of the State where the
- *Zip* Enter the zip code of the locality where the
- *Country* Enter the name of the country where the

DEFENDANT DETAILS

Defendant Name – Enter the name of the defendant here.

Defendant Details		
Defendant Name *		
Defendant Address *		
City *		
State *		
Zip *		
Country *		
Defendant Attorney Name *		
Defendant Attorney Address *		
City *		
State *		
Zip *		
Country *		

Defendant Address – Enter the defendant's address

- City Enter the name of the city where the
- State Enter the name of the State where the
- *Zip* Enter the zip code of the locality where the
- *Country* Enter the name of the Country where the

Defendant Attorney Name – Enter the name of the Defendant Attorney here.

Defendant Attorney Address – Enter the address of Defendant Attorney.

- *City* Enter the name of the City here.
- *State* Enter the name of the State.
- *Zip* Enter the zip code of the locality where
- *Country* Enter the name of the Country where the

Once done, click the Save Details button to save all the changes made. To remove any details from this field, select the detail and click the Remove Details link.

PENDING DIVORCE DETAILS

Divorced Spouse Name – Enter the name of the divorced spouse here.

Pending Divorce Details		
Divorced Spouse Name *		
Case Number *		
Filing Date *		
Grounds for Divorce *		
Name and complete Address of court involved		
Name of court *		
Court Address *		
City *		
State *		
Zip *		
Country *		

Case Number – Enter the case number here.

Filing Date – Enter the date on which the divorce case was filed. Click the calendar icon to select and enter the dd/mm/yyyy.

Grounds for Divorce – Describe the grounds on which the divorce took place.

NAME AND COMPLETE ADDRESS OF COURT INVOLVED

Name of court – Enter the name of the court involved in your divorce case.

Name and complete Address of court involved				
Name of court *				
Court Address *				
City *				
State *				
Zip *				
Country *				

Court address – Enter the address of the court here.

City - Enter the name of the city where the court is situated.

State – Enter the name of the State.

Zip – Enter the zip code of the locality where the court is situated.

Country – Enter the name of the country where the court is situated.

Plaintiff Details

Plaintiff Name - Enter the name of the plaintiff here.

Plaintiff Details		
Plaintiff Name *		
Plaintiff Address *		
City *		
State *		
Zip *		
Country *		
Plaintiff Attorney Name *		
Plaintiff Attorney Address *		
City *		
State *		
Zip *		
Country *		

Plaintiff Address - Provide plaintiff's address in this field

- *City* Enter the name of the city here.
- *State* Enter the name of the State here
- *Zip* Enter the zip code of the locality where the plaintiff's office is.
- *Country* Enter the name of the country here.
- *Plaintiff Attorney Name* Enter the name of the Plaintiff Attorney.
- Plaintiff Attorney Address Enter the address of the Plaintiff's Attorney's address.
- City Enter the name of the city where the
- State Enter the name of the State where the

Zip – Enter the zip code of the locality where the

Country – Enter the name of the country where the

Defendant Details

Defendant Name – Enter the name of the defendant here.

Defendant Details			
Defendant Name *			
Defendant Address *			
City *			
State *			
Zip *			
Country *			
Defendant Attorney Name *			
Defendant Attorney Address *			
City *			
State *			
Zip *			
Country *			

Defendant Address – Enter the defendant's address

- *City* Enter the name of the city where the
- *State* Enter the name of the State where the
- *Zip* Enter the zip code of the locality where the
- *Country* Enter the name of the Country where the
- *Defendant Attorney Name* Enter the name of the Defendant Attorney here.
- *Defendant Attorney Address* Enter the address of Defendant Attorney.
- *City* Enter the name of the City here.
- *State* Enter the name of the State.

Zip – Enter the zip code of the locality where

Country – Enter the name of the Country where the

Once done, click the Save Details button to save all the changes made. To remove any details from this field, select the detail and click the Remove Details link.

ANNULLED MARRIAGE DETAILS

Spouse Name – Enter the name of spouse here.

Annulled Marriage Details	
Spouse Name *	
Case Number *	
Filing Date *	
Grounds for Divorce *	
Name and complete A	ddress of court involved
Name of court *	
Court Address *	
City *	
State *	
Zip *	
Country *	

Case Number – Enter the case number here.

Filing Date – Enter the date on which the divorce case was filed. Click the calendar icon to select and enter the dd/mm/yyyy.

Grounds for Divorce – Describe the grounds on which the divorce took place.

Name and complete Address of court involved

Name of court – Enter the name of the court involved in your divorce case.

Court address – Enter the address of the court here.

- *City* Enter the name of the city where the court is situated.
- *State* Enter the name of the State.
- *Zip* Enter the zip code of the locality where the court is situated.

Country – Enter the name of the country where the court is situated.

Plaintiff Details

Plaintiff Name - Enter the name of the plaintiff here.

Plaintiff Details		
Plaintiff Name *		
Plaintiff Address *		
City *		
State *		
Zip *		
Country *		
Plaintiff Attorney Name *		
Plaintiff Attorney Address *		
City *		
State *		
Zip *		
Country *		

Plaintiff Address - Provide plaintiff's address in this field

- *City* Enter the name of the city here.
- State Enter the name of the State here
- *Zip* Enter the zip code of the locality where the plaintiff's office is.
- *Country* Enter the name of the country here.
- *Plaintiff Attorney Name* Enter the name of the Plaintiff Attorney.
- Plaintiff Attorney Address Enter the address of the Plaintiff's Attorney's address.
- City Enter the name of the city where the
- State Enter the name of the State where the
- *Zip* Enter the zip code of the locality where the

Country – Enter the name of the country where the

Defendant Details

Defendant Name – Enter the name of the defendant here.

Defendant Details			
Defendant Name *			
Defendant Address *			
City *			
State *			
Zip *			
Country *			
Defendant Attorney Name *			
Defendant Attorney Address *			
City *			
State *			
Zip *			
Country *			

Defendant Address – Enter the defendant's address

- *City* Enter the name of the city where the
- *State* Enter the name of the State where the
- *Zip* Enter the zip code of the locality where the
- *Country* Enter the name of the Country where the
- *Defendant Attorney Name* Enter the name of the Defendant Attorney here.
- *Defendant Attorney Address* Enter the address of Defendant Attorney.
- *City* Enter the name of the City here.
- *State* Enter the name of the State.
- *Zip* Enter the zip code of the locality where

Country – Enter the name of the Country where the

Once done, click the Save Details button to save all the changes made. To remove any details from this field, select the detail and click the Remove Details link.

Please give a complete list of all suits in equity, actions at law, suits in bankruptcy or other statutory proceedings, matters in probate, lunacy, guardianship and every other judicial or other administrative proceeding of every nature and kind, except divorce or criminal proceedings, to which you are or have been party- Click the box against None if the aforementioned are not applicable.

LEGAL ACTION LIST (CIVIL)

Complete Title of Action – Enter the

Case Number – Enter the case number here.

Filing Date – Enter the date on which the divorce case was filed. Click the calendar icon to select and enter the dd/mm/yyyy.

Name and complete Address of court involved

Name of court – Enter the name of the court involved in your divorce case.

Name and complete Address of court involved			
Name of court *			
Court Address *			
City *			
State *			
Zip *			
Country *			

Court address – Enter the address of the court here.

City - Enter the name of the city where the court is situated.

- *State* Enter the name of the State.
- *Zip* Enter the zip code of the locality where the court is situated.

Country – Enter the name of the country where the court is situated.

Plaintiff Details

Plaintiff Name - Enter the name of the plaintiff here.

Plaintiff Details		
Plaintiff Name *		
Plaintiff Address *		
City *		
State *		
Zip *		
Country *		
Plaintiff Attorney Name *		
Plaintiff Attorney Address *		
City *		
State *		
Zip *		
Country *		

Plaintiff Address - Provide plaintiff's address in this field

- *City* Enter the name of the city here.
- *State* Enter the name of the State here
- *Zip* Enter the zip code of the locality where the plaintiff's office is.
- *Country* Enter the name of the country here.

Plaintiff Attorney Name – Enter the name of the Plaintiff Attorney.

Plaintiff Attorney Address – Enter the address of the Plaintiff's Attorney's address.

- *City* Enter the name of the city where the
- *State* Enter the name of the State where the
- *Zip* Enter the zip code of the locality where the
- *Country* Enter the name of the country where the

Defendant Details

Defendant Name – Enter the name of the defendant here.

Defendant Details			
Defendant Name *			
Defendant Address *			
City *			
State *			
Zip *			
Country *			
Defendant Attorney Name *			
Defendant Attorney Address *			
City *			
State *			
Zip *			
Country *			

Defendant Address – Enter the defendant's address

- City Enter the name of the city where the
- State Enter the name of the State where the
- *Zip* Enter the zip code of the locality where the
- *Country* Enter the name of the Country where the

Defendant Attorney Name – Enter the name of the Defendant Attorney here.

Defendant Attorney Address – Enter the address of Defendant Attorney.

- *City* Enter the name of the City here.
- *State* Enter the name of the State.
- *Zip* Enter the zip code of the locality where
- *Country* Enter the name of the Country where the

Trial Date – To enter the trial date, click the calendar icon to select and enter the dd/mm/yyyy.

Date of final disposition – To enter the date of final disposition, click the calendar icon to select and enter the dd/mm/yyyy.

DISPOSITION			
Disposition *			
Are you the subject of any continuing court order (e.g., for child support or payment of a money judgment) *	Yes C No C		
Have any judgments ever been entered against you? *	Yes C No C		
If Yes, Judgment Held By			
If Yes, amount of jugement			
If the disposition resulted in a judgment, has the judgment been satisfied *	Yes O No O N/A O		
If yes, give the date the judgment was satisfied *			
If no, what amount is still owing *			
Brief explanation of suit *			
Save Details			

Are you the subject of any continuing court order (e.g., for child support or payment of a money judgment) - Click the radio button Yes or No as applicable.

If the disposition resulted in a judgment, has the judgment been satisfied - Click the radio button *Yes* or *No* or *N/A* as applicable.

If Yes, give the date the judgment was satisfied – Click the calendar icon to select the date on which the judgment was satisfied.

If no, what amount is still owing – Enter the amount if your answer for the above is No.

Brief explanation of suit – Explain briefly about the suit here.

I have attached to this Application certified copies of all judgments listed, whether satisfied or unsatisfied, and listed below the names and present addresses (with zip codes) of the holders- Click the radio button Yes or No or N/A as applicable.

If no, describe your efforts to secure the docket lists or indices in each proceeding identified in above – Explain in this field about your efforts to secure the docket lists or indices in each proceeding.

Click Save Application button to save all the inputs.

Click the *Next Page* link to move to the next application.

LEGAL PROCEEDING HISTORY (CRIMINAL)

NOTICE TO APPLICANT: Please complete the application, Attach all necessary required documents, Print sign and make oath to this form. This Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the character committee.

The following is a complete record of all criminal proceedings including traffic citations, arrests, and summonses to which I am or have ever been a party. I have listed here all motor vehicle citations for moving violations (including all speeding citations) and excluded only occasional parking violations. (You are not required to disclose here, or in answer to question 10 any matter adjudicated under laws governing juveniles or any arrest or court proceedings in Maryland, the record of which was expunged pursuant to the law). – Click the box None if it is not applicable.

		x	
Legal Action Details	т		
Case Number *			
Date *			
	Name and complete Address of court involved		
Name of court *			
Court Address *			
City *			
State *			
Zip *			
Country *			
Nature of Court Proceedings *			
Offense Charged *			
Caption of Case *		<u>^</u>	
		\mathbf{v}	
		^	
Disposition *		>	
Save Details			

Legal Action List – Click the Add Details link to enter the details here.

Fig 42 – Legal Action details page

Case Number – Enter the Case number here.

Date – Click the calendar icon to enter the date in this field.

Name and complete address of court involved

Name of court - Enter the name of the court.

Court address – Enter the address of the court here.

City – Enter the name of the City here.

State – Enter the name of the State.

Zip – Enter the zip code of the locality where

Country – Enter the name of the Country where the

Nature of court proceedings – Enter the nature of the court proceedings here.

Offense charged – List the offense that has been charged against you.

Caption of case – Enter the Caption of the case.

Disposition – Enter the disposition in this field.

Click the *Save Details* button to save all the information.

To remove any details from this field, select the detail and click the Remove Details link.

I have attached certified copies of all charging documents, judgments/disposition documents and all docket entries in each proceeding identified above, except motor vehicle offenses not requiring a court appearance. - Click the radio button *Yes* or *No* or *N/A* as applicable.

If no, describe your efforts to secure the docket lists or indices in each proceeding identified in above – Describe your efforts that you had taken to secure the docket lists or indices in each proceeding identified.

Click *Save Application* button to save all the inputs.

Click the *Next Page* link to move to the next application.

BOND HISTORY

NOTICE TO APPLICANT: Please complete the application, Attach all necessary required documents, Print sign and make oath to this form.

This Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the character committee.



Fig 43 – Bond History page

HAVE YOU EVER BEEN BONDED UNDER A SURETY BOND

[A surety bond is a contract for indemnification against failure to perform a duty.]

If so specify nature of office or position for which you were bonded, dates, amount of bond, name of Surety Company if known and whether anyone ever sought to recover upon your bond or to cancel the same. – If you have ever been bonded under a surety bond, then specify the nature of office or position for which you were bonded.

(b) Have you ever been refused fidelity or other bond. Click the Yes or No radio button as applicable.

[A fidelity bond is a contract for indemnification against breach of personal honesty by one in a position of trust.]

If so state facts and circumstances – If you have been refused fidelity or any other bond, state the facts and circumstances.

Once done, click the *Save Application* button to save all the information.

Click the *Next Page* link to move to the next application.

EMPLOYMENT HISTORY

NOTICE TO APPLICANT: Please complete the application, Attach all necessary required documents, Print sign and make oath to this form.

This Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the character committee.

APPLICATION FOR ADMISSION TO THE BAR OF MARYLAND			
	Part II		
Employement History			
NOTICE TO APPLICANT: Please complete the application	on, Attach all necessary required documents, Print	t sign and make	e oath to this form.
This Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the character committee.			
Previous Page	Save Application		Next Page
* Fileds are mandatory			
Employment Details List	Yan	dd Details	Remove Details
Have you been discharged or requested to resign from	n any employment *		Yes 🔿 No 📀
Previous Page	Save Application		Next Page

Fig 44 – Employment History page

Enter your employment details by clicking the Add Details button. It opens to the Employment Details page (Fig 44a) where you need to fill in the following fields;

	×
Employment Details	
Name of Employer *	
Address *	
Address	
City *	
State *	
Zip *	
Country *	
Supervisor Name *	
TelePhone Number *	
Position Held *	
Dates of Employment	
From Date *	12-
To Date *	
Reason for Leaving	
Save Details	

Fig 44a – Update Account

Name of Employer – Enter the name of your employer here.

Address – Enter the address of your employer.

Address

City – Enter the name of the city where the

State - Enter the name of the State where the

Zip – Enter the zip code.

Country - Enter the name of the country where the

Supervisor Name – Enter the name of your supervisor.

Telephone Number – Enter the telephone number of your office

Position Held – Enter the position held by you in that office.
DATES OF EMPLOYMENT

From Date – Click the calendar icon to enter the from dd/mm/yyyy

To Date - Click the calendar icon to enter the to dd/mm/yyyy

Reason for Leaving – Explain the reasons for leaving your last employer.

Once done, click the Save Details button to save all the information.

To remove any details from this field, select the detail and click the Remove Details link.

Have you been discharged or requested to resign from any employment - Click the *Yes* or *No* radio button as applicable.

Once done, click the Save Application button to save all the information.

Click the *Next Page* link to move to the next application.

MENTAL HEALTH/ ADDICTION HISTORY

NOTICE TO APPLICANT: Please complete the application, Attach all necessary required documents, Print sign and make oath to this form. This Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the character committee.

The purpose of the following inquiries is to determine the current fitness of an applicant to practice law. The mere fact of treatment for mental health problems or addictions is not, in itself, a basis on which an applicant is ordinarily denied admission in Maryland, and the State Board of Law Examiners routinely certifies for admission individuals who have demonstrated personal responsibility and maturity in dealing with mental health and addiction issues. The Board of Law Examiners encourages applicants who may benefit from treatment to seek it. The Board of Law Examiners does not, by its questions, seek information regarding any matter which is fairly characterized as situational counseling. Examples of situational counseling include stress counseling, domestic counseling, grief counseling, and counseling for eating or sleeping disorders. Generally, the Board of Law Examiners does not view these types of counseling as germane to the issue of whether an applicant is qualified to practice law.

(a)

(i) Do you have any condition or impairment (such as substance abuse, alcohol abuse, or a mental, emotional, nervous, or behavioral disorder or condition) that in any way currently affects, or, if untreated or not otherwise actively managed, could affect your ability to practice law in a competent and professional manner In this question "currently" means recently enough that the condition could reasonably have an impact on your ability

to function as a lawyer. "Actively managed" means that you receive the appropriate therapy, participate in supervised monitoring and/or a recognized peer support program, or utilize other appropriate support systems to cope with your condition or impairment.

Click the Yes or No radio button as applicable.

Previous Page	Save Application	Next P	age
* Fileds are mandatory			
The purpose of the following inquiries is applicant is ordinarily denied admission mental health and addiction issues. Th regarding any matter which is fairly cl sleeping disorders. Generally, the Board	; to determine the current fitness of an applicant to practice law. The mere fact of treatment for mental health pr in Maryland, and the State Board of Law Examiners routinely certifies for admission individuals who have demonst e Board of Law Examiners encourages applicants who may benefit from treatment to seek it. The Board of Law haracterized as situational counseling. Examples of situational counseling include stress counseling, domestic c d of Law Examiners does not view these types of counseling as germane to the issue of whether an applicant is qualif	oblems or addictions is not, in itself, a basis on wh rated personal responsibility and maturity in dealin Examiners does not, by its questions, seek inforn unseling, grief counseling, and counseling for eat fied to practice law.	ich a ig wit natio ting o
(a) (i) Do you have any condition or imp untreated or not otherwise actively man reasonably have an impact on your abili support program, or utilize other approp	airment (such as substance abuse, alcohol abuse, or a mental, emotional, nervous, or behavioral disorder or conditi naged, could affect your ability to practice law in a competent and professional manner? In this question "currently" ity to function as a lawyer. "Actively managed" means that you receive the appropriate therapy, participate in supe priate support systems to cope with your condition or impairment. *	on) that in any way currently affects, or, if ' means recently enough that the condition could rvised monitoring and/or a recognized peer	Ye (• No (*
If you answer "Yes" explain briefly desc	cribing the condition or impairment.		
(ii) If your answer to (a) (i) of this ques or treatment (with or without medicatio	tion is affirmative, are the limitations caused by your disorder, condition, or substance abuse problem reduced or ar n) or because you participate in a monitoring program or another support system (including A.A., N.A. etc.)? *	neliorated because you receive ongoing therapy	Ye No C
If you answer "Yes" explain briefly desc	cribing any treatment or therapy you received in the past year or receive now		
	treatment description		
(b) Within the past three years have yo your actions in any judicial or administra professional organization, or licensing a	u raised the issue of drugs or alcohol consumption or a mental, emotional, nervous, or behavior disorder or condition ative proceeding or investigation (including any inquiry or proceeding for proposed termination by an educational ins uthority)? *	n as a defense, mitigation, or explanation for titution, employer, governmental agency,	Ye O
(b) Within the past three years have yo your actions in any judicial or administra professional organization, or licensing a If you answer "Yes" explain briefly	u raised the issue of drugs or alcohol consumption or a mental, emotional, nervous, or behavior disorder or condition ative proceeding or investigation (including any inquiry or proceeding for proposed termination by an educational ins uthority)? *	n as a defense, mitigation, or explanation for titution, employer, governmental agency,	Yes © No C

If you answer "Yes" explain briefly describing the condition or impairment.

(ii) If your answer to (a) (i) of this question is affirmative, are the limitations caused by your disorder, condition, or substance abuse problem reduced or ameliorated because you receive ongoing therapy or treatment (with or without medication) or because you participate in a monitoring program or another support system (including A.A., N.A. etc.)

If you answer "Yes" explain briefly describing any treatment or therapy you received in the past year or receive now

(b) Within the past three years have you raised the issue of drugs or alcohol consumption or a mental, emotional, nervous, or behavior disorder or condition as a defense, mitigation, or explanation for your actions in any judicial or administrative proceeding or investigation (including any inquiry or proceeding for proposed termination by an educational institution, employer, governmental agency, professional organization, or licensing authority)

Click the Yes or No radio button as applicable.

If you answer "YES" to any of the questions above, you should ATTACH AN EXPLANATION describing the condition or impairment, and any treatment or therapy you received in the past year or receive now. If you have been under the care or supervision of a health-care professional, you also should SUBMIT A STATEMENT by the health-care professional specifying your current diagnosis, treatment regimen, and prognosis, and its bearing on your fitness to practice law.

Once done, click the Save Application button to save all the information.

Click the *Next Page* link to move to the next application.

PERSONAL REFERENCES

NOTICE TO APPLICANT: Please complete the application, Attach all necessary required documents, Print sign and make oath to this form.

This Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the character committee.

The following five persons, none of whom is married to another of the persons listed, and none of whom is a fellow law student, relative, or employer, have known me for at least five years immediately prior to the date of this QUESTIONNAIRE.

Here, you should enter all of your personal information for each of your references, be sure to complete all relevant sections and areas.

atus 🖉 My Account 🐺	My Application 🤯 Forms		
	APPL	ICATION FOR ADMISSION TO THE BAR OF MARYLAND	
		Part II	
Personal Reference			
NOTICE TO APPLICANT: Pleas	e complete the application, Attach all necessary	required documents, Print sign and make oath to this form.	
This Application will not be cor	sidered complete until the certificates, confirmat	ion, and letters of references required are received for processing by the character committee.	
		Save Application	Next Page
* Fields are mandatory			
Each of the five individuals responsible for pre-addressir	listed, will be asked to comment on the Applic ig the reference forms enclosed with this applica	ant's conduct, General moral character and standards, legal ability, honesty, integrity, and fitness to practice law. I ition.	he Applicant is
	E.C.	Reference - 1	
Full Name *	Ref 1		
Email Address	ret 1 e-mail		
Address *	Ref 1 addr		
Address	Ref 1 addr 2		
city *	Ref 1 City		
vin *	11142		
country *	Rof 1 Country		
country	Inter 1 Country	Reference - 2	
Full Name *	Ref 2		
Email Address	Ref 2 e-mail		
Address *	Ref 2 Addr		
Address	Ref 2 Addr2		
city *	Ref 2 City		
state *	Ref 2 State		
zip *	11144		
country *	Ref 2 Cntry		
		Reference - 3	
Full Name *	Ref 3		
Email Address	Ref 3 e-mail		
Address *	Ref 3 addr		
Address	Ref 3 Addr 2		
city *	Ref 3 City		
via *	11145		
country *	Ref 3 Cotry		
	Inter o citary	Reference - 4	
Full Name *	Ref 4		
Email Address	Ref 4 e-mail		
Address *	Ref 4 Addr		
city *	Ref 4 City		
state *	Ref 4 State		
zip *	11146		
country *	Ref 4 Cntry		
Full Name *	Pot 5	Reference - 5	
Email Address	jker o Ref 5 e-mail		
Address *	Ref 5 Addr		
Address	Ref 5 addr2		
city *	Ref 5 City		
state *	Ref 5 State		
zip *	11146		
country *	Ref 5 Cntry		

Once completed, click the *Save Application* button to save all your information.

Click the *Next Page* link to move to the next application.

ADMISSION TO ANY STATE BAR

NOTICE TO APPLICANT: Please complete the application, Attach all necessary required documents, Print sign and make oath to this form.

This Application will not be considered complete until the certificates, confirmation, and letters of references required are received for processing by the character committee.

Have you previously applied or registered for admission to the bar in this state or in any other jurisdiction

Click the Yes or No radio button as applicable.

If admitted, attach an original, sealed certificate of good standing. If not admitted, explain why not on a supplemental page.

If admitted, details – Click the Add Details button, to enter the following fields; *Jurisdiction* – Enter the jurisdiction here.

Date admitted – Enter the date in which you have been admitted.

Indicate whether admission was by – Click the drop down box to select from Admission by Examination, Admission on motion, Privilege.

		×		
Bar	Bar Admission Details			
	Jurisdiction *			
	Date Admitted *	17.		
	Indicate whether admission was by *	Admission by Examination 💟		
Save Details				

Fig 45 – Bar Admission details

Once completed, click Save Details.

Have you ever been the subject of a complaint or of a disciplinary investigation or proceeding concerning your conduct as an attorney or as a member of any other profession.

Click the Yes or No radio button as applicable.

If you answered yes, provide supported details.

Have there been any circumstances or unfavorable incidents in your life, whether at school, college, law school, business or otherwise, which may have a bearing upon your character or your fitness to practice law, not called for by the questions contained in this QUESTIONNAIRE or disclosed in your answers.

Click the Yes or No radio button as applicable.

If so, give full details, including any assertions or implication of dishonesty, misconduct, misrepresentation, financial irresponsibility, and disciplinary measures imposed (if any) by attaching a supplemental statement. You are not required to disclose, in response to this question, any juvenile proceeding or any criminal proceeding expunged pursuant to Maryland law. (Maryland law does not permit expungement of convictions.)

Once complete, click the Save Application button to save all the information.

PETITION SUBMISSION

PETITION TO TAKE MARYLAND BAR EXAMINATION			
ORIGINAL PETITION			
To the Honorable, the Court of Appeals of Maryland:			
Save Application Next Page			
* Fields are mandatory			
I petition to take the Maryland bar examination in Select 🗾 and in support of my petition give the following information.			
Full name			
Enter Your Legal Name	my name as it should appear		
Middle Name	My Middle Name		
Last Name	My Last Name		
Gender :	Male		
Choose the address where you wish to receive your examination seat assignment			

Fig 46 – Petition Details

	Choose the address where you wish to receive your examination seat assignment
	Mailing Address 🖸
Country	
Address	
Address	
County	
City	
State	
Zip/Postcode	
	Permanent Address

Fig 47 – Petition Details Mailing options

You should select the address you wish to receive your examination seat assignment to, Mailing address or Permanent address, select as appropriate

Social Security Number (Last four digits)(If you do not have a Social Security Number, contact the State Board of Law Examiners for information regarding opening your account)	4444
Are you taking the bar examination concurrently in another jurisdiction	C Yes 💿 No
If yes other jurisdiction	
Are you taking the Multistate Bar Examination(MBE) in	O Other Jurisdiction O Maryland
LSAC Number	LSA1234567
If the examination you plan to take will be offered at multiple sites, indicate, in rank order, your site preferences by visiting to the following website. <u>http://www.courts.state.md.us/ble/pdfs/gbdates.pdf</u> Please review these locations and insert your preference at the bottom of your Printed Petition on the line provided :	
©Save Application	Next Page

Fig 48 – Petition Details

Fig 48 states that you should select if you are taking the examination concurrently in another jurisdiction, and you should also add your LSAC number.

REQUEST FOR USE OF LAPTOP

PETITION TO TAKE MARYLAND BAR EXAMINATION			
Request For Use Of Laptop			
Previous Page	Save Application	Next Page	
* Fileds are mandatory			
Indicate whether you will*	${\ensuremath{\mathfrak{C}}}$ Handwrite the written test ${\ensuremath{^{\circ}\!$		
Email address to be used for Laptop computer use*	my_email_address@yahoo.com		
Before you apply to use a laptop for the general bar examination, you should read all instructions and information located at <u>www.mdcourts.gov</u> and also read the ExamSoft frequently asked questions (FAQs) on the "Support" tab at <u>www.mdcourts.gov</u> and also read the ExamSoft frequently asked questions (FAQs) on the "support" tab at <u>www.mdcourts.gov</u> and also read the ExamSoft frequently asked questions (FAQs) on the "support" tab at <u>www.mdcourts.gov</u> and also read the ExamSoft frequently asked questions (FAQs) on the "support" tab at <u>www.mdcourts.gov</u> and also read the ExamSoft frequently asked questions (FAQs) on the "support" tab at <u>www.mdcourts.gov</u> and also read tab examSoft frequently asked questions (FAQs) on the write support of the only form of payment which will be accepted is a credit card (Mastercard, Wisa, or American Express). Payment must be made on-line at ExamSoft's website when registering the laptop. Once you register to use your laptop, none of your laptop fee is refundable. Note that you must register and pay for using SofTest for each exam even if you previously installed and used SofTest for another examination. I have completely read all instructions and information for laptop use for the general bar examination located at <u>www.mdcourts.gov</u> s well as the FAQ's located at <u>www.examsoft.com/mdbar</u> .			
I have read and understand the requirements and terms to use my Laptop for the written examination.			
Previous Page	Save Application	Next Page	

Fig 49 – Laptop Request

Fig 49 states that you should select if you will take the exam with a laptop or if you will be hand writing the test,

you should also read the statement before agreeing and clicking on the check box in agreement.

REQUEST FOR SPECIAL ACCOMMODATION

Previous Page		Save Application	
* Fileds are mandatory	201 TR		
Are you applying for test accommodations for the bar examination*	C Yes C No		
If YES Please provide the following details.			
State Specific Test Accommodations Sought*			
An applicant who has a disability, as defined by the Americans with D demonstrate his or her competence. Please go to www.mdcourts.gov f the test accommodation application and submit with all required docur Your request for test accommodations should be mailed separately fr The State Board of Law examiners ("Board") will reject your request	isabilities Act, may request test accommodations for or complete instructions, application and deadline dat nentation. om the bar application. It is advisable to submit your t is not received by the deadline.	the bar examination to assure that he or she receives a fair and equal opportunity to fully es for requesting test accommodations. In order to receive consideration you must complete request for test accommodations at least 90 days before the examination you plan to take.	
-	a second a second second second second		

Fig 50 – Request for Special Accommodation

You should complete this section only if you are planning on requesting for special accommodation, please state yes or no, if yes please add specific details sought in the text box provided, not forgetting to check the box regarding you understand the requirements for special accommodation.

Petition is almost complete, you should Save your application, then move to My Application Checklist and click on Submit Application

Fig 51 – Submitting the Application

SUBMITTING YOUR APPLICATION

You should complete this by submitting your Application to the State Board of Law Examiners, by clicking on Submit Application.

- Request for use of Laptop
- Request For Special Accomodations
- Submit Application
- Submit Petition

SUBMIT APPLICATION WARNING NOTICE

The page at https://portal.mdcourts.gov says:		
?	Please review your Application for accuracy. Once submitted, you will no longer be able to edit this information. Any corrections will require you to contact the State Board of Law Examiners. You will be required to create a new Application.	
	Press "Ok" to Submit your Application. Press "Cancel" to review your Application.	
	OK Cancel	

Fig 52 – Submitting the Application Warning Notice

You should only submit your Application if you are confident that you have completed all sections to the best of your ability, once submitted you will not be able to edit it, if your unsure you may click on Cancel and review all of the area for correctness, or click OK to submit.

SUBMIT MY PETITION

Request for use of Laptop
 Request For Special Accomodations
 Submit Application
 Submit Petition

Fig 53 – Submitting Your Petition

You should complete your Petition by clicking on the Submit Petition submitting your Application to the State Board of Law Examiners, by clicking on Submit it you are agreeing to all sections of completeness.

SUBMIT PETITION WARNING NOTICE

The page at https://portal.mdcourts.gov says: × Image: Please review your Petition for accuracy. Once submitted, you will no longer be able to edit this information. Any corrections will require you to contact the State Board of Law Examiners. You will be required to create a new Petition. Press "Ok" to Submit your Petition. Press "Cancel" to review your Petition. OK Cancel

Fig 54 – Submitting Your Petition Warning Notice

You should only submit your Petition if you are confident that you have completed all sections to the best of your ability, once submitted you will not be able to edit this Petition and you will have to create this entire application again, if you're unsure you may click on Cancel and review all of the areas for correctness.

Once you are completely satisfied that all sections are complete, correct and ready you can cick on submit again and select OK when the warning screen appears.

Once you have checked and submitted both your Application and your Petition you have completed the process, you should now return to your Status tab and print out all sections.

PRINTING MY PETITION, PART I AND PART II

Bar Application Status		
(Part I) Eligibility	Eligibility met	
(Part II) Character & Fitness	Investigation Review	9
	Examination	
Petition	Petition accepted	9
Laptop (Exam Soft)	Granted	
Test Accomodations	Denied	

Fig 55 – Printing My Part I, Part II and my Petition

Click on the printer icons to the right of your Bar Application Status, you should print out each section in turn, collate all sections, and submit with any corresponding documentation that has been requested by the State Board of Law Examiners.

Check

SUBMISSION CHECKLIST

	SUBMISSION CHECKLIST
Maryland Bar Rules of Professional Conduct	
① Certification as to College Education (Pre-Legal)	
① Certified Copy of Complete Driving History	
Certified Copy of Order Changing Name	
Copy of the Court Order(s) requiring the Support Payment	
① Certification of High School	
① Certification of Graduate School	
Certified Copy of Armed Forces Discharge Document	
① Certified Copy of all Civil Judgments	
① Certified Copy of all Judgments and Docket Entries in all Criminal Proceeding	gs
Self Statement of Condition or Impairment	
Health Care Professional Report	
Personal Reference	
① Certificate of Good standing from each Jurisdiction	
Petition to sit for Maryland Bar Exam	
① Certification of Paid Maryland Taxes	
Rule of Professional Conduct Essay	
① Certification of Disclosure	
Authorization and Release (Notarization Required)	
Isignature on Maryland Rules of Professional Conduct	
Isignature Affidavit of Full and Truthful disclosure	
Self Statement concerning any matter bearing character and fitness to prace	tice Law

You should ensure that all of the above areas have been addressed and were applicable all the necessary area within the online application have been appropriately completed and checked.

UNDERSTANDING THE APPLICATION CHECKLIST ICONS

On the application check list, and once you have completed all sections, this will show up specific icons key on (Fig - 46) for the definition, below is the description for each Icon and what it represents.

Red Cross - indicates that this section has not been started, you can simply click on the name of the section next to the icon and this will take you to the appropriate section directly.

Yellow Triangle/ Exclamation Mark - indicates that you have either left this section incomplete or that you may have over looked some part of the application which maybe a mandatory selection, you should review this section for completeness if this shows on any part of your check list, you will not be able to complete your Application until this section is complete.

Green Check - Indicates that you have completed all areas of this section, and should move to the next section, as appropriate.

		APPLICATION CHECKLIST
		Instructions & Help
0	General Instructions	
0	Maryland Bar Rules of Professional Conduct	
		Part I
\odot	College Education	
		Part II
\odot	Personal Identification	
\odot	Marital History	
\odot	Court Ordered Spousal Or Child Support	
\odot	Residential History	
\odot	Educational History	
\odot	Armed Forces Details	
\odot	Credit History	
\odot	Legal Proceeding History (Civil)	
\odot	Legal Proceeding History (Criminal)	
\odot	Bond History	
\odot	Employment History	
\odot	Mental Health/Addiction History	
\odot	Personal Reference	
\odot	Admission to Any State Bar	
\odot	Petition to sit for Maryland Bar Exam(ORIGINAL)	
\odot	Request for use of Laptop	
\odot	Request For Special Accomodations	
\odot	Submit Application	
Ø	Submit Petition	

Fig 46 – Application Checklist