

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

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

Name: \_\_\_\_\_

First                      Middle                      Last                      Suffix

(Print your full name)

Social Security Number: \_\_\_\_\_

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

NCBE NUMBER: N \_\_\_\_\_

Mailing Address for all official correspondence:

\_\_\_\_\_  
(Street or Box Number Address)

\_\_\_\_\_  
(City, State & Zip Code)

\_\_\_\_\_  
(Daytime Telephone Number)

\_\_\_\_\_  
(Email Address)

Uniform Bar Examination (UBE) Information:

Date UBE Taken: \_\_\_\_\_

Jurisdiction in which UBE taken: \_\_\_\_\_

UBE Score: \_\_\_\_\_

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

**Fee: Make cashier's check or money order payable to the "Clerk, Arkansas Supreme Court". The Cashier's Check or money order in the amount of \$1500 must be submitted with the UBE Score Transfer application.**

Date of Birth: \_\_\_\_\_ Birthplace: \_\_\_\_\_

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

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Driver's License Number \_\_\_\_\_

State of Issuance \_\_\_\_\_

**PART ONE: RESIDENCES**

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

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

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

**PART TWO: EDUCATION**

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

College/University	Location	Dates of Attendance	Degree	Date Granted

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

ABA Accredited Law School	Location	Dates of Attendance	Degree	Date Granted

### PART THREE: EMPLOYMENT

When answering these questions, follow these instructions:

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

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

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

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