



# STATE OF MONTANA BOARD OF BAR EXAMINERS & COMMISSION ON CHARACTER & FITNESS

33 S. Last Chance Gulch, Suite 1B • P.O. BOX 577 • HELENA, MONTANA 59624  
(406) 442-7660 Fax (406) 442-7763 Web Site: [www.montanabar.org](http://www.montanabar.org)

For State Bar Use: Date Rec'd _____ Fee Pd. _____
---

## MONTANA APPLICATION COVER PAGE (Must be completed and submitted with application & fees for admission.)

APPLICANT NAME: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
(Valid E-mail Required)

\_\_\_\_\_  
(Law School) (City) (State) (Date of Graduation/JD awarded)

<input type="checkbox"/> ADMISSION BY EXAMINATION	<input type="checkbox"/> STUDENT APPLICANT (\$155)
<input type="checkbox"/> ADMISSION BY TRANSFERRED UBE SCORE	<input type="checkbox"/> ATTORNEY APPLICANT (\$410)

<input type="checkbox"/> ADMISSION ON MOTION APPLICANT (\$2500)
---

List all state(s) and jurisdictions where you have submitted an application for admission and the status of the application:

State / Jurisdiction	Admit Date	Status (active, inactive, withdrawn, pending, etc.)
_____	_____	_____
_____	_____	_____
_____	_____	_____

Multistate Professional Responsibility Exam (MPRE) within the last 3 years?	Date Taken: _____ Score* _____ To be taken: _____
---	---

### APPLICATION by EXAMINATION:

I am applying to sit for the Montana Uniform Bar Examination in:	<input type="checkbox"/> February	<input type="checkbox"/> July
I wish to complete the Essay portion of the examination by: (Registration with ExamSoft required for laptop users.)	<input type="checkbox"/> Handwriting	<input type="checkbox"/> Mac <input type="checkbox"/> PC
I have a disability for which I am requesting testing accommodations. (*Request for Testing Accommodation forms with complete documentation must accompany application.)	<input type="checkbox"/> No	<input type="checkbox"/> Yes*

### APPLICATION by TRANSFERRED UNIFORM BAR EXAMINATION (UBE) SCORE:

I have earned a UBE score within 3 years preceding application for admission. (Your certified score must be requested from the NCBE and sent directly to Montana.)	UBE Jurisdiction: _____ Exam Date _____ Score* _____
I have a concurrent application in another UBE jurisdiction. UBE Jurisdiction: _____	I intend to sit for the UBE in MT: <input type="checkbox"/> Yes <input type="checkbox"/> No

### APPLICATION by ADMISSION ON MOTION:

Applicants for Admission on Motion must comply with the requirements set forth in <a href="#">Rules For Admission to the Bar of Montana</a> and submit the documents outlined in the Rules and on the <a href="#">Montana Application Checklist</a> .
---