



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

P.O. BOX 577 • Helena, Montana 59624 • (406) 442-7660 • Web Site: [www.montanabar.org](http://www.montanabar.org)

For State Bar Use: Date Rec'd _____ Fee Pd. _____
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**MONTANA APPLICATION COVER PAGE**  
(Must be completed and submitted with application & fees for admission.)

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

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

(Valid E-mail Required for corresponding)

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

<input type="checkbox"/> ADMISSION BY EXAMINATION (\$310)	<input type="checkbox"/> STUDENT APPLICANT (\$155)
<input type="checkbox"/> ADMISSION BY TRANSFERRED UBE SCORE (\$155)	<input type="checkbox"/> ATTORNEY APPLICANT (\$410)

<input type="checkbox"/> ADMISSION ON MOTION APPLICANT (\$2,475)
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**List all state(s) and jurisdictions where you have applied for admission and the status of the application:**

State / Jurisdiction	Admission Date	Status (active, inactive, withdrawn, pending, etc.)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

Multistate Professional Responsibility Exam (MPRE) within the last 3 years?	Date Taken: _____ Score* _____ To be taken: _____
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**Application for 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
I would like to take a Courtesy Seat for the exam, meaning I wish to solely take the exam in Montana and do not wish to be admitted as an attorney in the State of Montana.	<input type="checkbox"/> No	<input type="checkbox"/> Yes

**Application for admission by Uniform Bar Exam (UBE) Score Transfer:**

I have earned a UBE score within 3 years preceding application for admission. (Your certified score must be submitted through NCBE to Montana.)	UBE Jurisdiction: _____ Exam Date: _____ Score: _____
I have a concurrent application in another UBE jurisdiction. UBE Jurisdiction: _____	