

BOARD OF LAW EXAMINERS OF THE STATE OF NORTH CAROLINA

5510 Six Forks Road, Suite 300, RALEIGH, NORTH CAROLINA 27609

CERTIFICATE OF MORAL CHARACTER**In Re:** _____ *Applicant to the North Carolina Bar Examination*

- How long and well have you known the applicant? *(If you are related by blood or marriage to the applicant, please include the nature of such relationship)* _____
.....
- What opportunities have you had for forming an opinion of this applicant's character? _____
- Are you personally acquainted with the applicant's associates? _____ If so, what is their reputation in the community?
.....
- What is the applicant's reputation for honesty? _____ integrity? _____
trustworthiness? _____ character? _____
- Please indicate to the best of your knowledge whether or not the applicant has ever been:
 - Discharged or asked to resign from employment _____
 - Dropped, suspended, asked to resign or otherwise subjected to discipline from any educational institution

 - Charged or arrested for a violation of any law _____
 - Addicted to the use of narcotics or intoxicating liquors _____
 - Accused of a violation of trust _____
 - A party to any court proceeding _____
 - Delinquent in any financial obligations _____
 - Adjudicated a bankrupt _____

If the answer to any of the above is yes, please provide a short summary of details on the back or on a separate sheet.

- Would you recommend this applicant for a position of trust and confidence? _____
 - In your opinion does this applicant possess the high standards of moral character you would expect from a licensed attorney? _____
- If the answer to these two questions is no, please explain in detail _____

I hereby certify that the information given in the foregoing answers is, where given from personal knowledge, correct; and where given from information received from others, has been obtained from sources which I believe to be reliable and was not secured from the applicant or members of the applicant's family.

_____ Date
Subscribed and sworn to before me this
the _____ day of _____, _____

Signature of Notary Public
My Commission Expires: _____

Signature _____

Name _____

Address _____

Occupation _____

TO BE PROPERLY NOTARIZED THIS DOCUMENT MUST HAVE STAMP OR SEAL AFFIXED

NOTE: The information which you provide will be disclosed only to those persons involved in the admission process. In order not to delay processing this applicant's application, PLEASE REMIT AS SOON AS POSSIBLE.