

**BAR EXAMINATION ACCOMMODATIONS FOR EXAMINEES WITH DISABILITIES  
ELIGIBILITY QUESTIONNAIRE**

Applicant Name \_\_\_\_\_ (please print)

**I. Disability Status (check all that apply)**

A. Are you:

- deaf?             hard of hearing?  
 blind?             visually impaired?

B. Do you have a:

- physical disability?  
Please explain \_\_\_\_\_  
 specific learning disability?  
Please explain \_\_\_\_\_  
 psychological disability?  
Please explain \_\_\_\_\_

C. How long have you had your disability?

- most of my life  
 1 year         2 years         3 years         4 years         5 years or more

**PLEASE INCLUDE CURRENT DOCUMENTATION FROM A DOCTOR,  
PSYCHOLOGIST, PSYCHIATRIST OR OTHER APPROPRIATE PROFESSIONAL  
CERTIFYING YOUR DISABILITY.**

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**II. Past Accommodations Made for Your Disability**

A. In high school:

- Were you in a special school or program?            Yes         No   
Did you get special accommodations for classroom tests?    Yes         No   
Did you generally get extra time for classroom tests?    Yes         No

B. Did you have special accommodations for taking the SAT or  
ACT examination for admission to college?            Yes         No

C. In college:

- Did you use disabled student services?            Yes         No   
Did you generally get extra time for exams?        Yes         No

D. Did you have special accommodations for the LSAT?            Yes         No   
If yes, what accommodations? (Check all that apply)

Formats:

- Braille         Tape         Large type

Help:

- Reader         Recorder         Sign language interpreter

Extra testing time

Other

Please explain \_\_\_\_\_

E. In law school:

- Did you use disabled student services?            Yes         No   
Did you generally get extra time for exams?        Yes         No

**PLEASE INCLUDE DOCUMENTATION OF SPECIAL SERVICES AND TESTING**

**ACCOMMODATIONS YOU RECEIVED IN LAW SCHOOL BECAUSE OF YOUR  
DISABILITY.**

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**III. I certify the above statements to be true.**

Signed \_\_\_\_\_ Date \_\_\_\_\_

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**IV. Accommodations Requested for the bar examination. (Check all that apply)**

Formats:

Braille       Tape       Large type    Regular

Help:

Reader       Recorder       Sign language interpreter

Extra testing time. How much testing time? (Check below)

Time and a half       Double time

Other

Please explain \_\_\_\_\_

**IN A SEPARATE LETTER, PLEASE DESCRIBE YOUR SPECIFIC DISABILITY, WHEN AND HOW IT WAS FIRST IDENTIFIED, AND THE ACCOMMODATIONS YOU ARE REQUESTING BECAUSE OF IT. MAIL THE LETTER, THIS FORM AND THE REQUESTED DOCUMENTATION TO:**

Tennessee Board of Law Examiners  
401 Church St., Suite 2200  
Nashville, Tennessee 37243-0740

*This form must be completed and current documentation submitted, each and every time you apply for the Tennessee bar examination.*