

INSTRUCTIONS FOR FORMS FLC12 & FLC15

Each Form FLC12 and Form FLC15 must come directly from the reference.

Form FLC12 (Question 12. Personal References). Type your name on the "Applicant:" line and type the name and address of the personal reference in the box at the top left. **Do not write in the rest of the form.** Mail the form to the reference with a stamped envelope addressed to the address below. You may not use a supervisor listed on Form FLC5 as a personal reference. Personal references may not be related to you or each other by blood or marriage. If a personal reference does not respond, you may replace the reference. Notify this office in writing which reference is being replaced and the name of the new reference.

Form FLC15 (Question 18. Employment). For each Form FLC15 type (1) on the "Applicant:" line, your name as it appears in Question #2 of your application, (2) your name during employment if different from above, (3) your social security number, (4) the position you held, (5) your dates of employment, and (6) the name and address of the employer in the box in the upper left. **Do not write in the rest of the form.** Mail the form to the employer with a stamped envelope addressed to the Committee (see address below).

In your cover letter to each employer, you should (1) emphasize the importance of returning the form promptly to the Committee, and (2) provide the employer with any other information to identify your employment records. Your cover letter must also specifically authorize the release of your employment information to the Committee.

It is not necessary to submit a Form FLC15 for military service (you must submit a DD214 as part of your answer to Question 29), self-employment, or employment that is **BOTH** unpaid **AND** for academic credit. Do not list these types of employment on your Form FLC5 – employer reference section.

If an employer is out of business, you must attempt to ascertain if its employment records remain available at another location and attempt to have Form FLC15 completed by Human Resources. Send Form FLC15 to the last known address of the employer. When the Form FLC15 is returned to you as undelivered, send it to this office with an explanation of the effort you made to contact the employer.

If your supervisor is no longer available, you should send the Form FLC15 to the personnel or human resources office or the keeper of the employment records for that employer, for verification of the dates of your employment and position held.

The Committee **suggests** that you send all Form FLC15's by **certified mail, return receipt requested**. (The return receipt should go back to you in the first instance, not the Bar Examining Committee.) In that case, if a previous employer fails to submit the Form FLC15, you can establish that you sent the form by submitting the original signed return receipt postcard ("green card") or, in the alternative, the original mailing receipt attached to the www.USPS.com printout showing the item was delivered.

List each employer from whom a Form FLC15 is required on the back of Form FLC5 in the space provided. Be sure to list both the employer/company and the specific individual who will be completing the Form FLC15 (your supervisor).

Send the letters to your personal or employer references and provide them with a stamped envelope addressed as follows:

**Connecticut Bar Examining Committee
Foreign Legal Consultant
Reference Letter Department
100 Washington Street
Hartford, CT 06106-4411**

Connecticut Bar Examining Committee

(Name & Address of Employer)

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Applicant: _____
 Name during employment (if different): _____
 SSN: _____
 Name of Employer/Company: _____
 Position Held: _____
 Dates of employment: From: _____ To: _____

This applicant has filed for admission as a foreign legal consultant in Connecticut. We are conducting a routine investigation into his/her character and fitness to become a foreign legal consultant. We would appreciate your candid evaluation of the applicant. Please complete this form in its entirety. A personal letter will **not** be accepted in lieu of this form; however, a personal letter may be attached hereto. This form has been sent to you by the applicant pursuant to the Bar Examining Committee's directions. It must not be sent back to the applicant, but sent directly to the Committee. The applicant was instructed to enclose a prepaid envelope addressed to the Committee. Thank you for your time.

- How long have you known the applicant? _____
- Are you related to the applicant? _____ If so, in what way _____
- What position did the applicant hold in your office? _____
- What were the applicant's dates of employment? From: _____ To: _____
- Were you satisfied with the applicant's performance of his/her duties? _____. If not, please tell us why on the other side.
- To your knowledge:

YES NO

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Has the applicant been arrested within the past five years or ever been convicted of a crime |
| <input type="checkbox"/> | <input type="checkbox"/> | Has the applicant ever been accused of a violation of trust |
| <input type="checkbox"/> | <input type="checkbox"/> | Has the applicant ever been dropped, suspended from, disciplined or placed on probation by an educational institution |
| <input type="checkbox"/> | <input type="checkbox"/> | Has the applicant ever been a party to a law suit (including bankruptcy) |
| <input type="checkbox"/> | <input type="checkbox"/> | Has the applicant ever been denied admission to the bar of any jurisdiction |
| <input type="checkbox"/> | <input type="checkbox"/> | Has the applicant ever been delinquent in any financial obligation |
| <input type="checkbox"/> | <input type="checkbox"/> | Does the applicant have any condition or impairment which in any way currently affects the applicant's ability to practice law |
| <input type="checkbox"/> | <input type="checkbox"/> | Has the applicant ever exhibited any pattern of behavior or conduct that raises significant concerns about the applicant's character and fitness to practice law |

If you answered "yes" to any of these questions, please tell us about it. You may also use this space for any additional comments you wish to make about the applicant. _____

- To your knowledge is the applicant currently suffering from a disability which would impair the applicant's ability to practice law? _____ If so, explain. _____

 Print Name

 Signature

Sworn to before me this _____ day of _____, 20____.

 Notary Public

Please note: Any information that you provide will be held in confidence unless it is used to establish probable cause to deny the applicant's admission as a foreign legal consultant.

Return address:

**Connecticut Bar Examining Committee
 Foreign Legal Consultant
 Reference Letter Department
 100 Washington Street
 Hartford, CT 06106-4411**