

**PETITION FOR TEST ACCOMMODATIONS  
AUTHORIZATION AND RELEASE**

I, \_\_\_\_\_, in connection with my petition for test accommodations on the bar examination, authorize the Connecticut Bar Examining Committee (Committee) to provide, at its discretion, a copy of any and all documentation that I submit in connection with this application, including any confidential medical records or information, to such persons and/or consultants as the Committee may deem necessary to adequately evaluate my application for test accommodations. If requested by the Committee, I further agree to submit to diagnostic testing at my expense by a physician, psychologist or other qualified professional chosen by the Committee.

If further information regarding the documentation that I have provided is needed, I authorize the Committee to contact the professional(s) who diagnosed and/or treated my disability. I further authorize such professionals to communicate with the Committee in this regard to provide such clarification and/or further information and documentation as the Committee requires.

I authorize the Committee to contact those entities which have provided me test accommodations or with whom I have a current petition for test accommodations pending for the purposes of ascertaining what accommodations have been or will be granted or denied. I further authorize such entities to communicate with the Committee in this regard to provide such clarification and/or further information and documentation as the Committee requires.

I hereby release, discharge, and exonerate the Committee, its agents, and representatives and/or any person from any and all liabilities of every nature and kind arising out of the furnishing, inspection or receipt of medical records, documents, records and other information, or any investigation made by or on behalf of the Committee.

State of \_\_\_\_\_ }  
County of \_\_\_\_\_ }

\_\_\_\_\_  
(Signature of Applicant)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
(Notary Public)  
(Commissioner of Superior Court)