

PLSI Bar Review Course Reimbursement Application

Eligibility - All PLSI alumni who have taken or will take a bar review course in 2019 or 2020, and have not been fully funded for the course are eligible for reimbursement of 75% of their bar review course cost up to a maximum of \$2,500. If a student has received a partial scholarship, grant, or tuition remission for the cost of the course for which they are applying, they are only eligible for reimbursement of the uncovered portion of the cost. **Review the 2019-2020 Guidelines before completing this application.**

Name: _____ PLSI Year: _____
 Address: _____
 City, State ZIP: _____
 E-Mail Address: _____
 Cell Phone: _____ Work Phone: _____
 Law School: _____ Graduation Year: _____

1. Bar examination state _____ UBE Exam: Y/N Anticipated Bar examination date: _____
 2. Name of bar review course(s): _____
 3. I will be, or was (circle one) employed while studying for the bar exam: Y/N Number of hrs. per week: _____
 4. Did you receive a scholarship, grant, or tuition reduction for the purpose of paying for this bar review course? (NOTE: select "yes" if award could only be used to pay for this bar review course. If it could be used for other purposes such as your bar application fees, living expenses, etc., select "No.") Yes _____ No _____
 - If yes, please indicate name of donor(s) **and** amount(s) received for each award and date of award:
 - Donor(s): _____
 - Amount(s) and Date(s): _____
 5. Have you previously taken a state bar examination? Y/N If yes, please indicate the following for each previous examination:
 - a) First Attempt

Bar examination state _____ Uniform Bar Examination: Y/N

Month and Year of the exam _____ Pass: Y/N

Scores: _____ (provide a breakdown of scores by section, or attach score report from bar examiners.)

Bar Review Course(s) (if any) for this bar examination and dates of course:

- Worked while studying: Y/N Number of hours worked per week while studying: _____ hrs/wk.
- Did you work with an attorney coach to prepare for this bar examination? Y/N If yes, please provide the name of your coach _____
- Did you receive a PLSI or AILC Bar Review Course Reimbursement for this bar examination? Y/N If yes, please specify type (PLSI or AILC) and amount: _____

b) Second Attempt

Bar examination state _____ Uniform Bar Examination: Y / N

Month and Year of the exam _____ Pass: Y / N

Scores: _____ (provide a breakdown of scores by section, or attach score report from bar examiners.)

Bar Review Course(s) (if any) for this bar examination and dates of course:

Worked while studying: Y / N Number of hours worked per week while studying: _____hrs/wk.

Did you work with an attorney coach to prepare for this bar examination? Y / N If yes, please provide the name of your coach _____

Did you receive a PLSI or AILC Bar Review Course Reimbursement for this bar examination? Y / N If yes, please specify type (PLSI or AILC) and amount: _____

c) Third Attempt

Bar examination state _____ Uniform Bar Examination: Y / N

Month and Year of the exam _____ Pass: Y / N

Scores: _____ (provide a breakdown of scores by section, or attach score report from bar examiners.)

Bar Review Course(s) (if any) for this bar examination and dates of course:

Worked while studying: Y / N Number of hours worked per week while studying: _____hrs/wk.

Did you work with an attorney coach to prepare for this bar examination? Y / N If yes, please provide the name of your coach _____

Did you receive a PLSI or AILC Bar Review Course Reimbursement for this bar examination? Y / N If yes, please specify type (PLSI or AILC) and amount: _____

d) Attach additional sheets, if necessary.

6. Do you want an attorney coach to work with you in conjunction with your preparation? Yes ___ No ___

Certification and Acknowledgment of Responsibility

I certify that to the best of my knowledge the information contained in this application is true. I understand that any misrepresentation of facts on this application and attachments could be cause for a misconduct investigation. I also certify that by accepting a bar review reimbursement from the American Indian Law Center, Inc. (AILC), **I will provide the results of the bar examination, including scores, to the AILC within thirty (30) days of receiving the results.** I authorize the AILC to contact my tribe and/or law school, if necessary, to verify my information. If I indicated that I want an attorney coach, I authorize the AILC to provide my contact information to the attorney coach selected.

Applicant's Signature

Date

For Internal Use Only: Amount Approved: \$ _____ Date: _____ By: _____

Funding Source: BIE PLSI Private