



Georgia Office of Bar Admissions

RENEWED PETITION FOR TESTING ACCOMMODATIONS FORM E

- 1. Applicant Name:**
- 2. Previous Accommodations:** Please provide the date(s) of the previous Georgia Bar Examination(s) in which you received Nonstandard Testing Accommodations (NTA).
- 3. What specific accommodations were you granted that you want to renew for the upcoming exam?**

I understand that I am seeking to renew accommodations that were granted to me for a previous Georgia Bar Exam.

I understand that I must submit this form to the Office of Bar Admissions no later than December 1 for the February exam and May 1 for the July exam.

I understand that if I want to apply for accommodations beyond what was previously granted or if my previous accommodations have expired, I must submit a new Request for Nonstandard Testing Accommodations (including Forms A -D) by the published deadline.

Finally, I understand that based on the date of the latest submitted evaluation or testing performed by my treatment care provider, I may be asked to submit more recent testing or evaluations in order to continue to receive testing accommodations.

I swear or affirm that all the information on this form is true and correct to the best of my knowledge, and I understand that it may be reviewed by a physician or other licensed professional.

Applicant's Signature

Date