

AUTHORIZATION AND RELEASE

Re: Application of _____
(Typed or Printed Name of Applicant or Registrant)

I, _____, having filed an application with the Georgia Board to Determine Fitness of Bar Applicants and fully recognizing the responsibility to the Public, the Bench, and the Bar of this State lodged with the Georgia Board to Determine Fitness of Bar Applicants by the Supreme Court of Georgia under the Constitution of the State of Georgia to determine that only those of high character and ability are admitted to the Bar of Georgia, hereby authorize and request every medical doctor, school official, and every other person, firm, officer, corporation, association, organization or institution having control of any documents, records or other information pertaining to me relevant to my good moral character and fitness to perform and the responsibilities of an attorney, to furnish the originals or copies of any such documents, records and other information to said Board, or any of its representatives, and to permit said Board, or any of its representatives, to inspect and make copies of any such documents, records and other information including but not limited to any and all medical reports, laboratory reports, X-rays or clinical abstracts which may have been made or prepared pursuant to, or in connection with any examination or examinations, consultation or consultations, test or tests, evaluation or evaluations, of the undersigned.

I hereby authorize all such persons as set out above to answer any inquiries, questions, or interrogatories concerning the undersigned which may be submitted to them by the Georgia Board to Determine Fitness of Bar Applicants or its authorized representative, and to appear before said Board, or its authorized representative, and to give full and complete testimony concerning the undersigned, including any information furnished by the undersigned. I hereby relinquish any and all rights to said reports, including but not limited to clinical abstracts, consultations, evaluations, or any other information incident in any way to cooperation with the Georgia Board to Determine Fitness of Bar Applicants, or its authorized representative, and fully understand that I shall not be entitled to have disclosed to me the contents of any of the foregoing.

I hereby release and exonerate every medical doctor, school official, and every other person, firm, officer, corporation, association, organization or institution which shall comply in good faith with the authorization and request made herein from any and all liability of every nature and kind growing out of or in anywise pertaining to the furnishing or inspection of such documents, records and other information or the investigation made by said Georgia Board to Determine Fitness of Bar Applicants. The undersigned further waives absolutely any privilege he/she may have relevant to his/her good moral character and fitness to perform the responsibilities of an attorney under Georgia Laws.

For the purpose of this release, the undersigned gives permission to use a photocopy of his/her signature on this form as an original signature.

In witness whereof, I have set my hand and seal this _____ day of _____, 20 _____

(Signature of Applicant) STATE OF _____ COUNTY OF _____

On _____, 20 _____ before me, _____
(Notary Public)

personally appeared the above-named applicant _____ personally known to me –OR– _____ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument to be the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

(Signature of Notary) My Commission Expires _____

CERTIFICATE

All forms of Authorization and Release executed by applicants for admission into the practice of law in Georgia terminate immediately upon admission to the State Bar of Georgia; upon receipt of notice of withdrawal of the application; or upon the termination of the application by final rejection of the applicant, except that such information may be forwarded to any other admitting authority where the applicant may later apply for admission to the practice of law.

I, SALLY EVANS LOCKWOOD, as Director of Bar Admissions for the Supreme Court of Georgia, hereby certify that the above-referenced registrant or applicant has not notified this Board of the withdrawal of his or her application; his or her application has not been terminated; nor is the registrant or applicant currently a member of the State Bar of Georgia.

DATE Sally Evans Lockwood, Director of Bar Admissions