

**IN THE SUPREME COURT OF OHIO  
BEFORE THE BOARD OF BAR EXAMINERS**

In the Matter of the Request of

for Testing Accommodations

**CERTIFICATE OF  
ACCOMMODATIONS**

(To be completed by any educational  
institution or employer that has provided  
accommodations to the applicant)

**The above applicant has requested accommodations to take the Ohio Bar Examination. The information you provide below will assist the Board of Bar Examiners in reviewing the applicant's request. It is important that all applicable questions be answered completely and that this certificate be submitted timely.**

**Please print or type your responses.**

1. List your name, position, name of the educational institution (or name of company or other employer), address, and telephone number.
  
  
  
  
  
  
  
  
  
  
2. Identify the course of study in which the applicant was enrolled at your educational institution (or provide the applicant's position of employment).
  
  
  
  
  
  
  
  
  
  
3. Provide the dates during which the applicant was enrolled at your educational institution (or employed by you) and the date that the applicant first began receiving accommodations.

4. While enrolled at your educational institution (or employed by you), did the applicant request that accommodations be granted? ☐ Yes ☐ No
5. Was the applicant granted any accommodations? ☐ Yes ☐ No
6. State the nature of the physical or other impairment of the applicant that served as the basis for granting accommodations.
7. Please describe the documentation that you required and that the applicant provided to support the grant of accommodations.
8. Specifically describe the accommodations granted to the applicant. If any accommodations were granted to the applicant to take tests, fully describe any changes in customary testing procedures offered to the applicant.

Signature

Date