

DO NOT ALTER THIS FORM

Corrections/erasures

VOID this form Please

use black or blue ink

To be used with Question 12

FORM 7C

AUTHORIZATION TO RELEASE INFORMATION

I, _____ authorize
(Full Name of Applicant)

(Name and Address of Program, Institution, or Person Making Disclosure)

to disclose to the National Conference of Bar Examiners, the Supreme Court of Ohio, the Board of Commissioners on Character and Fitness of the Supreme Court of Ohio, the Bar Admissions Section of the Supreme Court of Ohio, and the local Admissions Committee responsible for processing my application for admission to the practice of law, their agents or representatives, information, including copies of records, concerning advice, care or treatment given me regarding my mental health, and I further authorize any inquiries, questions or interrogatories concerning me, and authorize the appearance and testimony concerning my mental health before the Board of Commissioners on Character and Fitness of the Supreme Court of Ohio, or the local Admissions Committee or any agent or representative, as requested by those organizations.

The purpose of this authorized disclosure is to provide information to assist these organizations in their investigation of my character and fitness for admission to the practice of law in the State of Ohio. I am aware that covered entities may have obligations under HIPAA.

I further authorize any of the agencies listed in this authorization who have received information pursuant to this authorization to release it to any of the other agencies listed in this authorization.

I understand that the released records may become public to the extent permitted by Gov. Bar R. I.

I authorize a copy of this Authorization to Release Records to be considered the same as my original.

Signature of Applicant

Date

STATE/DISTRICT OF _____

COUNTY/PARISH OF _____

Subscribed and sworn to or affirmed before me this _____ day

of _____,

Month

Year

Signature of Notary Public

My commission expires _____

Seal or stamp must be affixed to each original.

The Supreme Court of Ohio is aware of HIPAA requirements.