

**ILLINOIS
BOARD OF
ADMISSIONS
TO THE BAR**



MPRE SCORE ADVISORY FORM

Complete this form only if you took the Illinois bar exam prior to 1999. Applicants who sat for the Illinois bar exam post 1998 must request their score advisory through NCBE at www.ncbex.org.

NAME WHEN TESTED (LAST, FIRST, MIDDLE): _____

CURRENT NAME (LAST, FIRST, MIDDLE): _____

EMAIL ADDRESS: _____ **PHONE:** _____

DATE OF BIRTH (MM/DD/YYYY): _____

DATE OF ILLINOIS BAR EXAM (e.g., Feb 19xx or July 19xx): _____

(1981-1998 ONLY. Post 1998 must be requested through NCBE at www.ncbex.org. Also, Illinois did not require MPRE scores until the July 1981 administration and therefore would not have record of MPRE scores for administrations prior to July 1981.)

I hereby request and authorize the Illinois Board of Admissions to the Bar to send my MPRE score upon payment of a fee of \$25 per jurisdiction to the following jurisdiction(s):

Jurisdiction: _____ \$ _____

Jurisdiction: _____ \$ _____

Jurisdiction: _____ \$ _____

Total: \$ _____

I hereby request that the Illinois Board of Admissions to the Bar send my MPRE score to me at the address listed below upon my payment of \$25 :

COMPANY NAME (if applicable): _____

STREET ADDRESS: _____ \$ _____

CITY: _____ **STATE:** _____ **ZIP:** _____

Enclosed please find my certified check, cashier's check or money order in the amount of \$ _____, made payable to IBAB. I understand and agree that *cash and personal checks will not be accepted*. I understand and agree that this payment is *nonrefundable*.

Signature: _____ **Date:** _____

Mail completed form and payment to:

IBAB MPRE Advisory, 625 South College Street, Springfield, IL 62704-2521

Your score(s) will be sent within 5 business days of receipt of this form and proper fee.