CHECKLIST FOR APPLICANTS SEEKING TESTING ACCOMMODATIONS

following che	ecklist to assist you in this process:
Submi	tted Petition for Accommodations and Eligibility Questionnaire (Form A).
Submi	tted Petitioner's Sworn Statement.
For ph	aysical disability:
	I have provided Form B to my physician.
	Form B completed by my physician.
	Submitted Form B.
For learning, cognitive, or psychological disability:	
	I have provided my licensed professional(s) with Form C and the Board's handout on <u>Documentation of Learning</u> , <u>Cognitive</u> , or <u>Psychological Disability Verification</u> .
	Form C completed by my licensed professional.
	Professional's Evaluation Report received.
	Submitted Evaluation Report.
	Licensed Professional has submitted raw data from any testing directly to the Nevada Board of Bar Examiners' Psychologist c/o the Nevada State Bar (Admissions Department).
	Submitted Law School Form

Because you bear the burden to submit required documentation, the Board has provided the