

**THE STATE OF NEW HAMPSHIRE  
JUDICIAL BRANCH**

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**Form B-LD**

**NEW HAMPSHIRE BAR EXAMINATION  
NONSTANDARD TESTING ACCOMMODATIONS**

**Documentation for Applicants Requesting Accommodations Based on a Learning Disability  
(To be completed by a qualified professional)**

**Dear Qualified Professional:** The New Hampshire Board of Bar Examiners requires an applicant seeking nonstandard testing accommodations for the New Hampshire Bar Examination to support his or her request with a comprehensive evaluation report from the qualified professional who conducted an individualized assessment of the applicant. An applicant's learning disability must have been identified by a testing process that includes data from cognitive and achievement measures, as identified below. Medical or other documentation must be sufficiently recent to demonstrate a current impairment. (See note at the end of this form for the definitions of current and comprehensive documentation). Any request for accommodation should be tied specifically to a functional limitation that supports the need for accommodation. For a learning disability, the report and testing should be no more than three years old to be considered current. Please attach a copy of the comprehensive evaluation report and all records and test results on which you relied in making the diagnosis and recommending accommodations for the New Hampshire Bar Examination. Please return this completed form, the comprehensive evaluation report, and relevant records and test results to the applicant for submission to the Board. Thank you.

***(Please Type or Print Legibly)***

Applicant Name:	
Applicant's learning disability: (Please reference the DSM-IV or DSM-5).	

**I. Evaluator/Qualified Professional:**

Professional's Name:		
Degree, Occupation, & Specialty:		
License/Certification Number:		
Address:		
Email:		
Telephone Number:		Fax Number:

Please describe your qualifications and experience in diagnosing and/or verifying the applicant's condition and recommending accommodations:

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**II. Diagnosis and Current Functional Limitations**

1. Provide the date the applicant was first diagnosed with a learning disability. \_\_\_\_\_

2. Did you make the initial diagnosis?  Yes  No

If no, provide the name of the professional who made the initial diagnosis and when it was made, if known. Attach copies of any prior evaluation reports, test results, or other records that you reviewed related to the initial diagnosis.

3. When did you first meet with the applicant? \_\_\_\_\_

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- 4. Provide the date of your last complete evaluation of the applicant. \_\_\_\_\_
- 5. Provide a concise description of your diagnosis. Please include the specific DSM-IV or DSM-5 diagnosis:  
\_\_\_\_\_  
\_\_\_\_\_
- 6. Describe the applicant's current level of functioning and the impact of any functional limitations on the applicant's major life activities related to taking the New Hampshire Bar Examination.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 7. Was the applicant's motivation level, interview behavior, and/or test-taking behavior adequate to yield reliable diagnostic information/test results?     Yes  No
- 8. Describe how this determination was made, including whether any symptom validity tests were administered. If such tests were not administered, please state why they were not.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**III. Attach a comprehensive evaluation report**

An applicant's specific learning disabilities must have been identified by an appropriate psycho-educational assessment process that is well documented in the form of a comprehensive evaluation report. The provision of reasonable accommodations is based on assessment of the *current* impact of the disability on the specific testing activity. Although a learning disability normally is life long, the severity and manifestations can change. The Board generally requires documentation from an evaluation conducted within the last three years to establish the current impact of the disability. Attach to this form a copy of the comprehensive evaluation report and all records and test results on which you relied in making the diagnosis and recommending accommodations for the New Hampshire Bar Examination. The evaluation report should include the following:

- A. an account of a thorough diagnostic interview that summarizes relevant components of the individual's developmental, medical, family, social, and educational history, and that shows the history of developmental learning problems;
- B. clear, objective evidence of a substantial limitation to learning or performance provided through assessment in the areas of cognitive aptitude, achievement, and information processing abilities (results must be obtained on standardized test(s) appropriate to the general adult population and be reported in age-based standard scores and percentiles);
- C. interpretation of the diagnostic profile that integrates assessment data, background history, and observations made during the evaluation process, as well as the inclusion or ruling out of possible coexisting conditions (such as previously diagnosed psychological issues or English as a second language) affecting the applicant's performance;
- D. a specific diagnostic statement, which should not include nonspecific terms such as "learning differences," "learning styles," or "academic problems"; and
- E. a rationale for each recommended accommodation based on diagnostic information presented (background history, test scores, documented observations, etc.).

**IV. Formal Testing**

Tests used in the evaluation must be reliable, valid, and age-appropriate. Scores should be reported as age-based standard scores and percentiles. The following tests are provided as a guide to assessment instruments appropriate to the adult population. The list is not intended to be all inclusive and will vary with the needs of the individual being evaluated. Please show how any low test scores adversely impact the applicant's real world functioning.

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Tests of Cognitive Ability and Processes, such as:

- Wechsler Adult Intelligence Scale IV (WAIS IV) (or most current version) (including IQ, index, and scaled scores)
- Woodcock-Johnson III (WJ III): Tests of Cognitive Ability
- Stanford-Binet Intelligence Scale (4th ed.)
- Kaufman Adolescent and Adult Intelligence Test

Please note: The Slossen Intelligence Test and the Kaufman Brief Intelligence Test are primarily screening instruments and should not be considered comprehensive measures of aptitude/cognitive ability.

Tests of Achievement, such as:

- Woodcock-Johnson III (WJ III): Tests of Achievement
- Wechsler Individual Achievement Test (WIAT)
- Scholastic Abilities Test for Adults (SATA)

Please note: The Wide Range Achievement Test: Third Edition (WRAT-3), the Peabody Individual Achievement Test (PIAT, PIAT-R), and the Nelson Denny Reading Test are not comprehensive measures of academic achievement and should not be used as sole measures in this area.

Information Processing:

- Wechsler Memory Scale III
- Swanson Cognitive Process Test (S-CPT)
- Test of Adolescent/Adult Wordfinding (TAWF)
- Information from subtest, index, and/or cluster scores on the WAIS III (Working Memory, Perceptual Organization, Processing Speed) and/or the Woodcock-Johnson III (WJ III): Tests of Cognitive Ability (Visual Processing, Short Term Memory, Long Term Memory, Processing Speed) and/or The Detroit Tests of Learning Aptitude-Adult (DTLA-A), as well as other neuropsychological instruments that measure rapid automatized naming and/or phonological processing.

**V. Recommended Accommodations**

Taking into consideration the description of the examination and the functional limitations currently experienced by the applicant, what testing accommodation(s) do you recommend? (Check all that apply)

**A. Test Format / Accessibility**

Test Question Format	Personal Assistance				
	MBE	Essay		MBE	Essay
Braille	<input type="checkbox"/>	<input type="checkbox"/>	Scribe	<input type="checkbox"/>	<input type="checkbox"/>
Audio CD	<input type="checkbox"/>	<input type="checkbox"/>	Reader	<input type="checkbox"/>	<input type="checkbox"/>
Large Print exam (18 pt. font)	<input type="checkbox"/>	<input type="checkbox"/>	Assistance with computer	<input type="checkbox"/>	<input type="checkbox"/>
Large Print exam (24 pt. font)	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>

Explain the rationale for your recommendation:

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**B. Additional Test Time**

Test Portion	Standard Time	Extra Time Requested
MPT/Performance Test Essay	Tuesday AM 3 hours	
MEE/Essay	Tuesday PM 3 hours	
MBE/Multiple-Choice	Wednesday 3 hours AM 3 hours PM	

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Explain the rationale for your recommendation of extra time and how the extra time will alleviate the impact of the disability in the testing environment.

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**C. Extra Breaks**

Describe the duration and frequency of the requested breaks, and explain the rationale for the requested breaks and how they will alleviate the impact of the disability in the testing environment.

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**D. Separate Room**

Are you recommending a separate room?  Yes  No. If you are requesting a separate room, explain why a separate room is necessary, and how it will alleviate the impact of the disability in the testing environment.

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**E. Other Arrangements. (e.g. medication, lamp, etc.)**

Describe the arrangements and explain why the other arrangements are necessary and how they will alleviate the impact of the disability in the testing environment.

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I certify that all the information on this form is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Qualified Professional

\_\_\_\_\_  
Printed Name

NOTE: I understand that this information may be reviewed by a qualified professional retained by the New Hampshire Board of Bar Examiners to assist in determining whether a disability exists as defined by the ADA, and in determining reasonable testing accommodations.

**CURRENT AND COMPREHENSIVE DOCUMENTATION:**

**Current documentation:** Medical or other documentation must be sufficiently recent to demonstrate a current impairment. Use the following guidelines to determine whether your documentation is sufficiently recent. Failure to provide recent medical documentation may result in the rejection of your request as incomplete.

Accommodation requests based on Physical, Vision, or Hearing Disabilities. If the disability has been present since birth, or is expected to be permanent, or is not expected to improve over time, the applicant must provide a copy of his or her most recent medical evaluation. If the disability has not been present since birth, or is expected to be temporary, or is expected to improve with time, the applicant should provide medical documentation that is no more than one year old measured from the date of the evaluation to the date of the current application.

Accommodation requests based on Learning Disabilities, ADHD, or other Cognitive Disorders. The applicant's medical documentation should be no more than three years old measured from the date of the evaluation to the date of the current application. For individuals with a documented history since childhood of learning disabilities, ADHD, or other cognitive disorders, documentation no more than five years old will be considered.

Accommodation requests based on Psychiatric Disabilities. The applicant's medical documentation should be no more than one year old measured from the date of the evaluation to the date of the current application.

**Comprehensive documentation:** Medical or other documentation must be comprehensive. The medical documentation must be sufficient to establish a disability under the ADA and to establish a need for testing accommodations. **Any accommodation request should be tied specifically to a functional limitation that supports the need for the accommodation.** If the request is based on a learning disability, ADHD, or other cognitive disorder, the applicant should provide copies of any available historical documentation that can establish a childhood onset (i.e. elementary school) of symptoms and impairment. These early symptoms and impairments should be documented beyond self-report, and may include such items as elementary school report cards, teacher comments, individualized education plans (IEP's), 504 plans, and documentation from tutors or learning specialists. Medical documentation concerning the applicant's first formal diagnosis is also helpful and should be provided where available. It may also be helpful to provide narrative information from third parties who have known the applicant well, such as parents, spouses, professors, special education specialists, or others, and who can describe their observations of the applicant's behavior in managing his or her disability and functional limitations.