

CHANGE OF MAILING ADDRESS, TELEPHONE NUMBER OR E-MAIL ADDRESS

For Michigan Bar Exam Applicant Use Only

Your answers on the Affidavit of Personal History are considered as continuing to be true until the date of your admission to the State Bar of Michigan. If any answer or portion of an answer ceases to be true, you have a continuing obligation to immediately inform the Standing Committee on Character and Fitness. All updates must be in writing. This form must be used to notify the Character & Fitness Department of a change in your current mailing address, telephone number or e-mail address.

ADDRESS OF RECORD

The State Bar of Michigan will mail correspondence to the applicant's **current** mailing address (F-3/Affidavit of Personal History, Question 2). Additionally, for routine inquiries, the Character & Fitness staff may use the e-mail address provided on the Affidavit of Personal History.

FORM INSTRUCTIONS

This form is a fillable PDF, therefore, all submissions **must be typed**.

1. Enter the **DATE** of submission.
2. Enter your **FULL LEGAL NAME**: First, Middle, Last, Suffix (as applicable).
3. Enter your 5-digit **APPLICANT NUMBER**. This information is helpful, but not required.
4. If updating this information, enter your new **E-MAIL** address.
5. If updating this information, enter your new **PHONE NUMBER** and indicate if this is a cell/mobile number.
6. If updating your mailing address:
 - a. Enter your **FORMER "Current Mailing Address,"** including dates and,
 - b. Enter your **NEW "Current Mailing Address,"** including the effective date.

FORM SUBMISSION

This form may be returned to the Character & Fitness Department via e-mail to the Staff Person affiliated with your file, or to: cfquestionsforms@michbar.org or mailed: State Bar of Michigan, Attn: C&F, 306 Townsend St, Lansing MI 48933

***** PLEASE NOTE *****

To update your **RESIDENCE** history, please use the F-4u form which follows on page 3.

***** PLEASE NOTE *****

The Board of Law Examiners will mail correspondence to the applicant's **permanent** address, as reported on the F-1/Application to Sit or as updated at the bar exam. This includes the bar examination seat packet and bar exam results. Written updates to the permanent address **must be mailed to the State Board of Law Examiners, PO Box 30052, Lansing, MI 48909.**

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Update to Applicant's Contact Information for the Character & Fitness Department

*****THIS FORM MUST BE TYPED*****

Date

Name

(First, Middle, Last, Suffix)	Update (X)	New Information	
C&F Applicant Number _____ (if known)	<input type="checkbox"/>	Email Address Phone Number Is this a Cell/Mobile number?	Yes No
		Mailing Address <i>See fillable fields below</i>	

Enter the current mailing address on file with Character & Fitness.

Former MAILING address for
Character & Fitness

MO/YR to MO/DD/YR

Address 1

Address 2

Address 3

City

State or Province

Zip or Country & Postal Code

(8) Enter the new address.

NEW MAILING address for
Character & Fitness

EFFECTIVE DATE:

MO/DD/YR

Address 1

Address 2

Address 3

City

State or Province

Zip or Country & Postal Code

Submit form to Character & Fitness

via e-mail to the Staff Person affiliated with your file, or to: cfquestionsforms@michbar.org

or mail: State Bar of Michigan, Attn: C&F, 306 Townsend St, Lansing MI 48933

RESIDENCE HISTORY
Question 22: Update (F-4u)
Supplemental Answer Sheet to Affidavit of Personal History

Date:

Question No. 22

Applicant's Full Legal Name:

All residences at which you have lived, for a period of three months or more, including all addresses used for schooling, business, or any other temporary purposes, since the age 18 are to be reported to Character & Fitness. Provide information in reverse chronological order.

The following entry is an **Update** to the **RESIDENCE HISTORY** information submitted on the Affidavit of Personal History.

PRESENT

From MM/DD/YY To Present (CURRENT) RESIDENCE STREET ADDRESS

CITY

STATE/PROVINCE

ZIP CODE

COUNTRY (If Not USA)

The following entry is the **IMMEDIATE PAST RESIDENCE ADDRESS**.

From MM/YR To MM/DD/YY (FORMER) STREET ADDRESS

CITY

STATE/PROVINCE

ZIP CODE

COUNTRY (If Not USA)

**APPLICANT: Please submit this form to the Character & Fitness Department
via email to the Staff Person affiliated with your file, or to
cfquestionsforms@michbar.org or
by mail to State Bar of Michigan, Attn: C&F, 306 Townsend St, Lansing, MI 48933**