

NEW YORK STATE BOARD OF LAW EXAMINERS
Corporate Plaza, Building 3, 254 Washington Ave. Ext., Albany NY 12203
Fax Number: (518) 452-5729

Administrative Accommodation Request Form For Lactating Individuals

Lactating individuals may apply for administrative accommodations during the New York bar examination based on their individual needs. The request must be supported by appropriate medical documentation.

The Board can award the following administrative accommodations when timely requested:

1. Permission to bring lactation supplies (including pump, small cooler and ice packs) into the exam room.
2. (a) A private space for pumping that is equipped with a chair, table, and electrical outlet (refrigeration is not available at any site) to pump during the lunch break; **or**

(b) A private space for pumping that is equipped with a chair, table, and electrical outlet (refrigeration is not available at any site) and off-the-clock break time of at least 30 minutes every three hours to pump during the exam.

This form with appropriate supporting medical documentation **MUST** be timely submitted to the Board's office **no later than January 1st for a February exam or June 1st for a July exam**, particularly if off-the-clock break time (accommodation # 2 [b] above) is being requested. This is because individuals requesting off-the-clock breaks must be seated at one of the Board's two non-standard test accommodation sites, which are located in New York City or Albany only (based on availability), and the Board must finalize all rooms and seats with these vendors at these sites by this deadline. **Untimely requests for off-the-clock break time (accommodation # 2 [b] above) will be rejected.** Individuals requesting only accommodations #1 and #2 (a) will be seated in the general population at a test center location they choose from the locations available at the time they access the Board's seating location email. If the need for accommodations #1 and/or #2 (a) arises after the deadline above, a request may be made by submitting this form and providing supporting documentation but the Board cannot guarantee that it will be processed in time for the exam.

Please initial your request:

_____ I request to bring lactation supplies into the exam room and a private space to pump during the lunch break. I understand that I will be seated at a general population test center in the location that I choose upon receiving the Board's seating location email.

_____ I request to bring lactation supplies into the exam room, as well as a private space and off-the-clock breaks to pump during the exam. I understand that I will be seated by the Board at a nonstandard test accommodation site where seats are available in either New York City or Albany.

Name: _____ **BOLE ID:** _____

By signing this form, I acknowledge and affirm my understanding that I must provide supporting medical documentation for this request, that I must comply with the above deadline and that untimely requests may not be granted or processed in time.

Applicant's Signature: _____ **Date:** _____