

**LAW STUDENT  
APPLICATION FOR TEMPORARY LICENSURE  
UNDER ILLINOIS SUPREME COURT RULE 711**

*Instructions:* Completed applications should be submitted to the Administrative Office of the Illinois Courts (AOIC) via email at [Rule711@illinoiscourts.gov](mailto:Rule711@illinoiscourts.gov), or via regular mail at: **AOIC (Attn: 711 Processing)  
222 N. LaSalle, 13<sup>th</sup> Floor  
Chicago, IL 60601**

This form is not to be altered in any way other than by filling in the blanks/check marks.

**Section A. (to be completed by Applicant)**

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First Name

Middle Initial

Last Name

Street Address

City/State/Zip

Telephone

Email Address

Please check all applicable boxes below:

- I am a current law student at \_\_\_\_\_ law school.
- I have completed at least one half of the total hourly credits required for graduation from the above-named law school.
- My expected graduation date from the above-named law school is \_\_\_\_\_.
- I understand that in order to remain eligible for licensure under Illinois Supreme Court Rule 711 after graduation, I must sit for and receive a passing score on the first Illinois bar exam and Multistate Professional Responsibility Exam (MPRE) administered following my graduation from the above-named law school:
  - I intend to take the Illinois bar exam in \_\_\_\_\_.
  - I do not intend to take the Illinois bar exam and I understand that, if approved, my Rule 711 license will expire upon my graduation from law school.

I hereby certify the information in Section A is accurate and true.

\_\_\_\_\_/\_\_\_\_\_  
**Applicant (Signature) / Date**

**Section B. (to be completed by Supervising Attorney)**

The services authorized by Illinois Supreme Court Rule 711, which I acknowledge I have read, will be performed under my supervision by \_\_\_\_\_.  
Applicant/Student's name

Employer Name

Supervising Attorney Name and ARDC #

Employer Address

City/State/Zip

Employer Telephone

Supervising Attorney Email Address

The Employer indicated above is (check appropriate box):

- A legal aid bureau, legal assistance program, organization or clinic chartered by the State of Illinois or approved by a law school approved by the American Bar Association
- The Office of the Public Defender
- An office, agency or department of the state or any of its subdivisions
- An office, agency or department of the United States or any of its subdivisions

I hereby certify that the information in Section B is accurate and true.

\_\_\_\_\_  
Supervising Attorney (Signature) / Date

**Section C. (to be completed by the Dean of Applicant's law school)**

By checking the below boxes, I hereby certify the following information is accurate and true:

- I have reviewed the information provided in Sections A and B of this application.
- The Applicant is in good academic standing.
- The Applicant is eligible under the school's criteria to undertake the activities authorized by Illinois Supreme Court Rule 711.
- The Applicant meets the eligibility requirements for temporary licensure under Illinois Supreme Court Rule 711.

\_\_\_\_\_  
Dean of Law School (Signature) / Date

\_\_\_\_\_  
(Dean's Office email address for all 711 correspondence)

**For Office Use Only:** Approved by: \_\_\_\_\_ Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_