INSTRUCTIONS FOR COMPLETING THE BIOGRAPHICAL AREA ARE ON THE BACK COVER OF YOUR TEST BOOKLET.
USE ONLY A NO. 2 OR HB PENCIL TO COMPLETE THIS ANSWER SHEET. DO NOT USE INK.

A

USE A NO. 2 OR HB PENCIL ONLY

● **Right Mark** ⊘ ⊗ ⊖ **Wrong Marks**

1 LAST NAME / FIRST NAME / MI

2 SOCIAL SECURITY/ SOCIAL INSURANCE NO.

3 LSAC ACCOUNT NUMBER

L

4 CENTER NUMBER

5 DATE OF BIRTH

MONTH	DAY	YEAR
○ Jan		
○ Feb		
○ Mar	0 0	0 0
○ Apr	1 1	1 1
○ May	2 2	2 2
○ June	3 3	3 3
○ July	4 4	4 4
○ Aug	5 5	5 5
○ Sept	6 6	6 6
○ Oct	7 7	7 7
○ Nov	8 8	8 8
○ Dec	9 9	9 9

6 TEST FORM CODE

7 RACIAL/ETHNIC DESCRIPTION
Mark one or more

- ○ 1 Amer. Indian/Alaska Native
- ○ 2 Asian
- ○ 3 Black/African American
- ○ 4 Canadian Aboriginal
- ○ 5 Caucasian/White
- ○ 6 Hispanic/Latino
- ○ 7 Native Hawaiian/ Other Pacific Islander
- ○ 8 Puerto Rican
- ○ 9 TSI/Aboriginal Australian

8 GENDER
○ Male
○ Female

9 DOMINANT LANGUAGE
○ English
○ Other

10 ENGLISH FLUENCY
○ Yes
○ No

11 TEST DATE
MONTH / DAY / YEAR

12 TEST FORM

Law School Admission Test

Mark one and only one answer to each question. Be sure to fill in completely the space for your intended answer choice. If you erase, do so completely. Make no stray marks.

SECTION 1	SECTION 2	SECTION 3	SECTION 4	SECTION 5
1 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	1 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	1 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	1 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	1 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
2 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	2 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	2 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	2 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	2 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
3 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	3 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	3 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	3 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	3 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
4 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	4 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	4 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	4 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	4 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
5 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	5 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	5 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	5 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	5 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
6 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	6 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	6 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	6 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	6 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
7 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	7 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	7 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	7 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	7 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
8 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	8 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	8 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	8 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	8 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
9 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	9 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	9 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	9 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	9 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
10 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	10 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	10 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	10 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	10 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
11 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	11 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	11 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	11 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	11 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
12 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	12 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	12 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	12 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	12 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
13 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	13 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	13 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	13 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	13 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
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15 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	15 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	15 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	15 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	15 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
16 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	16 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	16 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	16 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	16 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
17 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	17 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	17 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	17 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	17 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
18 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	18 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	18 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	18 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	18 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
19 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	19 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	19 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	19 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	19 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
20 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	20 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	20 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	20 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	20 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
21 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	21 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	21 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	21 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	21 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
22 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	22 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	22 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	22 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	22 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
23 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	23 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	23 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	23 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	23 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
24 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	24 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	24 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	24 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	24 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
25 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	25 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	25 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	25 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	25 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
26 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	26 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	26 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	26 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	26 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
27 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	27 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	27 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	27 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	27 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
28 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	28 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	28 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	28 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	28 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
29 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	29 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	29 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	29 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	29 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
30 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	30 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	30 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	30 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ	30 Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

13 TEST BOOK SERIAL NO.

14 PLEASE PRINT INFORMATION

LAST NAME FIRST

SSN/SIN

DATE OF BIRTH

● Ⓑ