



Enrollment Verification for Transfer & Visiting Applicants or Prior Law Enrollment

The top portion of this form is to be completed by the applicant. The remainder of the form, below the double horizontal lines, is to be completed by an official from the applicant's home law school.

Applicant Name:					
First		М.	Last		
Applicant Address	5:				
	Number and Street				Apt./Unit
	City	1	ST	ZIP	
Phone Number: () -	LSAC Account Number: L			

ACCESS WAIVER – Please read carefully.

I have requested that this form be completed for use by Southwestern Law School in its admissions process. I authorize the belowreferenced institution to provide a candid evaluation and all relevant information to Southwestern Law School and give permission for the release of academic and disciplinary records. I understand that federal legislation provides me with a right of access to this form, which may be waived, but that no school or person can require me to waive this right.

I waive my right of access to this completed form. The form must be sent directly to Southwestern Law School by my home law school.

□ I do not waive my right of access to this completed form.

Applicant Signature:

Date:

THIS SECTION IS FOR THE RESPONDING SCHOOL OFFICIAL ONLY

Both the applicant and Southwestern Law School appreciate prompt completion of this form. The applicant's file cannot be completed until this form is received by Southwestern Law School. **Please return as soon as possible by fax to 213-986-3911.**

Name of Law School:	Applicant's Current Cumulative GPA:			
Applicant's Dates of Attendance: From: To:	Expected Graduation Date:			
 a) Is the applicant currently attending your institution? b) If "yes," is the applicant in good standing? Yes c) Is the applicant making academic progress at your ins Has the applicant been the subject of disciplinary action 	No – Please attach an explanation. Stitution? \Box Yes \Box No – Please attach an explanation.			
	\Box Yes – Please attach an explanation. \Box No			
School Official Name:	Signature:			
School Official Position:	Date:			