REQUEST TO APPLY FOR TRANSFER TO ANOTHER SCHOOL OF LAW

Student’s Name ___________________________________________ ID# __________________________

I request the following information be sent to the institution(s) designated below:

_____ a letter of good standing at the end of the _____ Fall _____ Spring semester

_____ a statement of my class rank at the end of the same semester

_____ a copy of my LSDAS report from my student file

Name of Institution ___________________________________________________________________________
Address ____________________________________________________________________________________
City/State/Zip ______________________________________________________________________________

Name of Institution ___________________________________________________________________________
Address ____________________________________________________________________________________
City/State/Zip ______________________________________________________________________________

Additional school addresses may be added on the back of this form or on a separate sheet of paper.

The first two schools are free. Additional schools will cost $50.00 per school. The fee will be charged to your student account and fees are non-refundable. You must go online and pay any fees due before any letter(s) will be sent out.

If the transfer school(s) require an official academic transcript, you need to request this at http://www.valpo.edu/law/current-students/law-registrar/c-transcripts.

Student’s Signature: __________________________ Date: ____________________

Student’s phone # and e-mail: ________________________________________________________________

Reason for transfer: _______________________________________________________________________
_______________________________________________________________________________________

Signature: __________________________ Date: ____________________

Director of Student Relations

Joseph T. Baruffi  Phone 219.465.7969  Fax 219.465.7872