GEORGETOWN UNIVERSITY LAW CENTER

FALL 2026 EARLY ASSURANCE DEAN'S CERTIFICATION FORM - GEORGETOWN JUNIORS ONLY

This certification is used primarily for record-keeping purposes and is not intended to serve as a required recommendation. The form should be given to a Georgetown University college official with access to the school's official records from the academic college from which a baccalaureate degree will be awarded. This official need not know the applicant personally. However, if the official is familiar with the applicant, he or she should feel free to submit a separate letter of recommendation with this form. The applicant should complete the first two sections of the form.

Last Name	First Name Middle Na				dle Name	:	
Preferred First Name	Previous Names						
GU ID Number	Date of Birth			Ema	il		
Cellular Number	Other Phone Number	nber					
Name/Title of person Completing Certificatio	1						
School at Georgetown	Dates of Attendance	of Attendance at Georgetown University					
Major Subject		Degree Expected					
WAIVER OF ACCESS I understand that this form will be for use in t Educational Rights and Privacy Act of 1974 (Fi this right, we will preserve the strict confiden In accordance with FERPA:	ERPA) gives an enrolled student the right to f tiality of this form.		to any	reco	ommenda		
nature of Applicant Date					<u> </u>		
TO BE COMPLETED BY A COLLEGE/LAW SCHOOL	DL OFFICIAL WITH ACCESS TO THE SCHOOL'S (OFFICIAL REC	ORDS				
Is the applicant currently in attenda	nce at your institution?		Yes		No	If No, please explain.	
Is the applicant in good standing?		0	Yes		No	If No, please explain.	
Has the applicant been the subject of academic censure?	of disciplinary action or proceedings	0	Yes		No	If Yes, please explain	
Please give the applicant's current cumulative	e GPA and rank in class (if available):						
DI	-	GP	A			Rank	
Please provide the applicant's SAT and/or AC	scores:	SA	T			ACT	
If you have additional information which you student, please feel free to provide this in an		iittee when c	onside	ering	the applic	cation of the above named	
Signature of Administrative Official						Date	
Name and Title of Administrative Official (plea	ase print) Present Day Numbe					Email	

Please send the completed form to lawspecialprograms@georgetown.edu.