CENTER FOR TRANSNATIONAL LEGAL STUDIES

Nomination/Student Information Form

(The following section is to be completed by the nominated student.)

F Date o	[First Name/Given Name] f Birth (month/day/year):	
		//
ip:	Other Citizenship	
	Other Chrizenship	
untry code):	E-mail:	
h this address is valid (m	nonth/day/year)	
s:		
h this address is valid (m	nonth/day/year)	
ur home law school		
of law study have you co	mpleted?	
er(s) have you been nomi	inated to study at CTLS?	
Spring 2019	Fall 2018 and Spri	ng 2019
v are you interested in? _		
	h this address is valid (m ss: h this address is valid (m ur home law school of law study have you co er(s) have you been nomi Spring 2019 w are you interested in? _	h this address is valid (month/day/year)

(The following section is to be completed by an authorized representative at the student's home institution.)

The above named student has been nominated to participate in this exchange program. He/she is in good academic standing and has the academic record and English language proficiency required for participation in this program.

The above named student has not been the subject of disciplinary action or of academic censure. The above named student has not been the subject of academic suspension or probation.

Signature and Date

Name and Title of Authorized Representative