## GEORGETOWN UNIVERSITY LAW CENTER

## TRANSFER CERTIFICATION FORM SPRING / FALL 2021

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 law school official with access to the school's official records. This official need not know the applicant personally.

The applicant should complete the first two sections of the form.

| STUDENT INFORMATION   | <b>:</b>                               |                                 |                          |                    |                                  |  |
|---|--|---------------------------------|--------------------------|--------------------|----------------------------------|--|
| □ Mr. □ Ms. □ Dr. □ 0   | Other                                  |                                 |                          |                    |                                  |  |
| Last Name   | First Name                             | Middle Name                     |                          | Maiden/Former Name |                                  |  |
| Address   |  | City                            |                          | State              | Zip                              |  |
| Present Day Number  |  | Present Evening Nur             | mber                     |                    |                                  |  |
| Cellular Number   |  | Email                           |                          |                    |                                  |  |
| Date of Birth   |  | LSAC Account Numb               | er                       |                    |                                  |  |
| WAIVER OF ACCESS:   |  |                                 |                          |                    |                                  |  |
| I understand that this form will be<br>Educational Rights and Privacy A<br>waive this right, we will preserve | ct of 1974 (FERPA) gives an $\epsilon$ | enrolled student the right to f | _                        | ,                  | •                                |  |
| In accordance with FERPA:   | ☐ I waive access to                    | this form.                      | OT waive access to       | this form.         |                                  |  |
| Signature of Applicant  |  | Date                            |                          |                    |                                  |  |
| TO BE COMPLETED BY A  | COLLEGE/LAW SCHOO                      | OL OFFICIAL WITH ACC            | ESS TO THE SC            | CHOOL'S OF         | FICIAL RECORDS:                  |  |
| Is the applicant curren   | itution?                               | ☐ Yes                           | ☐ No                     |                    |                                  |  |
| Is the applicant in goo   |  | Yes                             | □ No                     |                    |                                  |  |
| Has the applicant beer of academic censure?   | ction or proceedings                   | ☐ Yes                           | □ No                     |                    |                                  |  |
| Please give the applicant's curre   | nt cumulative GPA and rank i           | n class (if available):         |                          |                    | <u>-</u>                         |  |
| If you have additional informatic student, please feel free to prov   |  | pful to our Admissions Comm     | GPA<br>ittee when consid | ering the applic   | Rank<br>ation of the above named |  |
| Signature of Administrative Official  |  |                                 |                          | Date               |                                  |  |
| Name and Title of Administrative  | Official (please print)                | Present Day Number              |                          |                    |                                  |  |

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

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