

Please request that the Registrar's Office at your law school complete this form and send it directly to:

Graduate Admissions: lawllmadmis@georgetown.edu | www.law.georgetown.edu/admissions-financial-aid/

TO BE COMPLETED BY APPLICANT

Mr./ Ms.

is an applicant to the Georgetown University Law Center Graduate School as a candidate for the degree of

(Applicant, please specify program)

WAIVER OF ACCESS

I have requested that this appraisal form be completed and forwarded to Georgetown Law by			
Name of Registrar			
	student the right to future access to any recom- mendations provided. If you waive this right, we will preserve the strict confidentiality of this document. In accordance with FERPA (please check one):		
ate	 I waive access to this report. Shall be considered confidential. I do not waive access to this report. Non-confidential. 		
	d and forwarded to Georgetown Law by		

TO BE COMPLETED BY REGISTRAR:

2. Degrees av	varded and Dates:			
3. Language o			al by the American Bar Association (U.S. Law Schools Only)
5. Please prov	ide yearly average and rank in		AVERAGES GIVEN ARE	BANKS GIVEN ARE
5. Please prov First Year	ide yearly average and rank in AVERAGE / SCALE	class, if available: RANK / CLASS SIZE	AVERAGES GIVEN ARE	RANKS GIVEN ARE
·	AVERAGE / SCALE	RANK / CLASS SIZE	Cumulative	
First Year	AVERAGE / SCALE	RANK / CLASS SIZE	Cumulative	Cumulative

6. Please attach a copy of the applicant's transcripts/academic record (not required for international applicants registered with the LSAC LL.M. Credential Assembly Service).

Has the applicant ever been the subject of disciplinary proceedings?

Please include any additional facts concerning this individual that are relevant to this application.



School Name and Address

Telephone

E-Mail Address

Signature

Date