Please check below to indicate the information that is needed, the date of the request and your requested completion date. PLEASE PRINT the information legibly and sign at the bottom. (Your request will NOT be processed without your signature!) Be sure to include the middle initial of your name as that is the way you are listed in the computer!

NAME __________________________________________________________________

(Check one!) __________ IL ___________ 2L __________ 3L __________ LL.M./S.J.D.

OR GRADUATION YEAR ___________ OR YR LAST ATTENDED ____________

WAKE FOREST ID# (if current student) ______________________________________

DATE SUBMITTED _____________________________________________________

REQUESTED COMPLETION DATE ______________________________________

________ Copy of WFU Law School Application

________ Copy of LSDAS report, including LSAT score

________ LSAT score ONLY

________ Enrollment certification (will you pick-up? Yes No)

________ Other (explain) __________________________________________________

Instructions: _____________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

Signature: _____________________________________________________________

SUBMIT COMPLETED FORM VIA FAX TO 336-758-4362 OR
E-MAIL TO lawregistrar@wfu.edu