



# The University of Akron ■ School of Law

## Application for Admission ■ Transient J.D. Students

J.D.—Transient

### Applicant Information — please type or print neatly in ink

Please consider me for admission as a visiting /transient student for  Fall  Spring  Summer of \_\_\_\_\_ (Year)

In the  Full-Time Day Division or  Part-Time Evening Division

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Prefix:  Mr.  Ms.  Dr.  Other \_\_\_\_\_ Immediate Former Last Name \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ UA ID Number \_\_\_\_\_

For University of Akron Students, Alumni, and Employees Only

### Contact Information

E-mail Address \_\_\_\_\_

Current Phone \_\_\_\_\_ Permanent Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Permanent Address \_\_\_\_\_ County (Ohio only) \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Current Address \_\_\_\_\_ County (Ohio only) \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

### Person to Notify in Case of Emergency

Name (Last, First) \_\_\_\_\_ Relationship \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

### Residency Information

Permanent Residence  Ohio  State other than Ohio  U.S. citizen living abroad  Foreign Country

If you are an Ohio resident,

Date Ohio residency was established \_\_\_\_ / \_\_\_\_ / \_\_\_\_ County of residence \_\_\_\_\_  
MM DD YYYY

### Educational Information—Law School Attendance

Current Law School \_\_\_\_\_ Location \_\_\_\_\_

Cumulative law school GPA as of most recent semester completed \_\_\_\_\_ Approx. class ranking \_\_\_\_\_

How many credit hours do you expect to have earned by the end of the current semester? \_\_\_\_\_

What was the date of your first class at this law school? \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
MM DD YYYY

Have you been subject to disciplinary action, investigation, or academic probation at this law school?  Yes  No

If yes, please explain IN DETAIL in a supplementary statement.

