



## INTERSESSION APPLICATION

**Please complete this form and return all required materials to:**  
 Loyola Law School · Office of the Registrar · 919 Albany Street · Los Angeles, CA 90015

Title:  Last Name:  Suffix:  First Name:  Middle Name:

Social Security Number:  Name on previous academic records, if different from above:

Date of Birth:  Gender:  Male  Female Phone Number:  E-mail:

Address:  City:  State:  Zip Code:

Citizenship:  U.S.  Permanent Resident  Other (specify Country) \_\_\_\_\_

Ethnic Identity (Select one or more):

Are you Hispanic/Latino?  Yes  No

<input type="checkbox"/> American Indian/Native Alaskan	<input type="checkbox"/> Middle Eastern
<input type="checkbox"/> Black/African American	<input type="checkbox"/> Pacific Islander/Native Hawaiian
<input type="checkbox"/> Canadian Aboriginal	<input type="checkbox"/> Other Asian/Asian American (specify) _____
<input type="checkbox"/> Central American	<input type="checkbox"/> Pilipino/Pilipino American
<input type="checkbox"/> Chicano/Mexican American	<input type="checkbox"/> Puerto Rican
<input type="checkbox"/> Chinese/Chinese American	<input type="checkbox"/> South American
<input type="checkbox"/> Cuban/Cuban American	<input type="checkbox"/> Southeast Asian
<input type="checkbox"/> Japanese/Japanese American	<input type="checkbox"/> Vietnamese/Vietnamese American
<input type="checkbox"/> Korean/Korean American	<input type="checkbox"/> White/Caucasian

Place of Employment:

**EDUCATIONAL INFORMATION**

List all law schools attended in chronological order

Name of Institution	Mo/Yr Started	Mo/Yr Ended	Major	GPA	Date Diploma Received

State Bar Certification Number: \_\_\_\_\_ State \_\_\_\_\_

Employer	Mo/Yr Started	Address



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Which course(s) will you be taking at Loyola Law School?

Course Title	Course Code	Professor

### DISCLOSURES

Have you ever been the subject of any disciplinary action taken by a school, college or university?     Yes     No

If yes, provide name of institution(s), date(s) and reasons in a separate written statement and enclose with this application.

Have you ever been convicted of, or pleaded guilty to, the violation of any law or ordinance, or the commission of any felony or misdemeanor (excluding minor traffic violations)?     Yes     No

If your answer is yes, for each occurrence furnish a written statement giving the complete facts, including the date, name and nature of the offense, the name and locality of the court, and the disposition of each such matter. The statement must accompany the application.

I certify that all the information contained in this application, and in all the supplemental materials which I shall submit, is accurate and true. I understand that any false or misleading statement may disqualify my application or terminate my studies as a student at this school. I further understand that any submitted records and documents are not returnable.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Signature:  
 \_\_\_\_\_