

**Application Form  
Florida State University  
College of Law**

Desired Entry Date August 20__
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**LL.M. Program in American Law for Foreign Lawyers**

**Please print or type:**

**Name and Address**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Permanent mailing address \_\_\_\_\_  
Number and street or box number City

Province or State Postal Code Country This address valid to \_\_\_\_\_ / \_\_\_\_\_  
Month Year

Telephone number (if in U.S.) \_\_\_\_\_ / \_\_\_\_\_ Fax number \_\_\_\_\_ / \_\_\_\_\_ E-mail address \_\_\_\_\_  
Area Code Number Area Code Number

Present mailing address (if different from above) \_\_\_\_\_  
Number and street or box number City

Province or state Postal Code Country This address valid until \_\_\_\_\_ / \_\_\_\_\_

Telephone number (if in U.S.) \_\_\_\_\_ / \_\_\_\_\_ Fax number \_\_\_\_\_ / \_\_\_\_\_ E-mail address \_\_\_\_\_  
Area Code Number Area Code Number

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**Personal Data**

Male  Female

Since FSU is a recipient of federal dollars, we are required by the federal government to solicit certain demographic information to meet federal reporting requirements. You are requested to provide this information voluntarily. This information will not be used in a discriminatory manner.

**National Origin**

Asian or Pacific Islander  Black (not of Hispanic origin)  Hispanic  White (not of Hispanic origin)

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ City and country of birth \_\_\_\_\_  
Month Day Year City Country

Country of citizenship \_\_\_\_\_ Native language \_\_\_\_\_

If you have a U.S. Social Security number, enter it here \_\_\_\_\_

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**Language Proficiency**

**What is your first language?** \_\_\_\_\_

If English is not your first language, please describe your English language training and fluency. Do you speak or write English in your home or work environment?

\_\_\_\_\_  
\_\_\_\_\_

What languages do you speak and/or write other than your first language?

\_\_\_\_\_

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**TOEFL** (Test of English as a Foreign Language) Date \_\_\_\_\_ L \_\_\_\_\_ S \_\_\_\_\_ V \_\_\_\_\_ TWE \_\_\_\_\_ Total Score \_\_\_\_\_

Have you applied to FSU before? ( ) Yes ( ) No If yes, when?

**Educational Background**

List in chronological order all secondary and postsecondary schools, colleges, universities, or other institutions you have attended or are currently attending. Use a separate sheet if necessary. **Please do not abbreviate.**

Secondary Schools	Dates of Attendance		Certificates, degrees and/or diplomas earned/	
	From	To	expected. Use exact title, i.e. Diploma, Matrise, etc.	
Name	Month	Year	Degree	Month/Year

Name \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_

Name \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_

Postsecondary schools, colleges, universities, and/or other institutions.	Month	Year	Degree	Month/Year
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Name \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_

Name \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_

Name \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_

Name \_\_\_\_\_  
City \_\_\_\_\_ State/Country \_\_\_\_\_

If there has been a period of time other than summer vacations, when you were not enrolled in school, please explain what you were doing (i.e. work, military, travel). (Attach additional pages if needed.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please list courses (subjects) in which you are now enrolled and/or expect to complete before entering FSU:**

Name of Institution	Title of Course(s)	Date course will end		Credit Hours
		Month/Year		Sem./Qtr

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List significant scholastic honors you have received including degrees with honors, scholarships, fellowships, prizes, honor societies, etc.

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List significant extracurricular or community activities with which you have been involved. Describe briefly your contributions to each.

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**EMPLOYMENT HISTORY**

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Indicate all countries where you have been admitted to practice law and dates of admission.

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**CURRENT TITLE AND DIVISION**

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**Dates of Employment**

Organization

Address (include street address for air courier delivery)

City, Province/State, Country, Postal Code

Phone

Fax

Email

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**List other full-time positions held, including military experience. (Attach other pages if necessary.)**

**POSITION**

**Dates of Employment**

Organization

Address

City, Province/State, Country, Postal Code

Phone

Fax

Email

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**Please list someone who will always be able to contact you:**

Name (underline family name)

Relationship to you

Address

City, Province/State, Country, Postal Code

Phone

Fax

Email

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**Immigration Information**

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If you are a United States permanent Resident, you must provide a photocopy (front & back) of your alien registration card ("green card").

Which visa do you presently hold?  None  F1  F2  J1  Other \_\_\_\_\_ I-94 Expiration Date: \_\_\_/\_\_\_/\_\_\_  
Specify and attach photocopy Mo Yr

If you are on a Student Visa (F-1), please indicate your immigration admission number \_\_\_\_\_

What institution, if any, issued your last I-20 or IAP-66? \_\_\_\_\_ Did you enroll?  Yes  No

If you are currently in the United States, when and for what purpose did you come? \_\_\_/\_\_\_/\_\_\_  
Mo Year Purpose

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**SPONSORSHIP**

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If an organization will be sponsoring your study at FSU, please indicate the individual responsible:

Name \_\_\_\_\_ Title and Division \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

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**LETTERS OF RECOMMENDATION**

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Furnish the Admissions Committee with two letters of evaluation from persons with sufficient knowledge of you to assess your aptitude for law study and the practice of law. (Use the forms provided in this application).

Recommendation 1: \_\_\_\_\_  
Name Title

Recommendation 2: \_\_\_\_\_  
Name Title

If your family plans to accompany you to the United States and will be on your visa, please provide biographical data on each person.

Name	Date of Birth (Month/Day/Year)	Place of Birth (City/State/Country)	Citizenship	Relationship (husband, wife, son daughter, etc.)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Other**

If the answer to any of the following is yes, you must submit a full statement of relevant facts on a separate sheet of paper. You may be required to furnish FSU with copies of all official documentation explaining the final disposition of the proceedings.

Are you currently, or have you ever been, charged with, or subject to, disciplinary action for scholastic or any other type of misconduct at any education institution?

- Yes
- No

Have you ever been charged with a violation of the law which resulted in, or if still pending could result in, probation, community service, a jail sentence, or the revocation or suspension of your driver's license (including traffic violations that resulted in a fine of \$200 or more)?

- Yes
- No

If your records have been expunged pursuant to applicable law, you are not required to answer yes to these questions. If you are unsure whether you should answer yes to either question, we strongly suggest that you answer yes and fully disclose all incidents. By doing so, you can avoid any risk of disciplinary action or revocation of an offer of admission.

**Optional:**

If you wish to request special admission consideration based on a disability, check here.

*Official documentation of the disability should be forwarded with the application.*

**Signature**

I understand that this application is for admission to Florida State University and is valid only for the term indicated. I also understand and agree that I will be bound by the University's regulations concerning the application deadline dates and admission requirements. I further agree to the release of all transcripts and test scores to this institution, including tests score reports that this institution may request. Once received, these documents become the sole property of the University. I certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application may result in disciplinary action, denial of admission, and invalidation of credits or degrees earned. If admitted, I hereby agree to abide by the policies of the Board of Education and the rules and regulation of Florida State University. Should any of the information I have given change prior to my entry to the University, I shall immediately notify the College of Law. **I understand that the \$30 U.S. check or money order that must accompany this application is a nonrefundable fee.**

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

\_\_\_\_\_  
Date

This application and all accompanying materials should be mailed to the following address:



**Director, L.L.M. Program  
Florida State University  
College of Law  
Office of Admissions  
Tallahassee, FL 32306-1601  
U.S.A.**

**TRANSCRIPT REQUEST FORM**  
**FLORIDA STATE UNIVERSITY**  
**COLLEGE OF LAW LL.M. PROGRAM**  
(PHOTOCOPY THIS FORM AS NEEDED)

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**To the Applicant:**

Please complete this part of the form. Send this form to your school(s) and ask that they return it to you directly in a sealed envelope. Please photocopy this form if you need transcripts from several schools. If the transcript is not provided in English, please request a certified translation through your school.

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Name of Applicant

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Field of Study

Year of Graduation

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**I hereby authorize the release of a transcript for my academic record to the Florida State University College of Law LL.M. Program.**

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Signature of Applicant

Date

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**To the School:**

The person named above is applying for admission to the Florida State University LL.M. Program. Please complete this form and enclose two copies of the applicant's academic transcript in a sealed envelope, sign across the seal, then return it to the applicant so that it can be included with his or her application. If your transcript is not provided in English, please attach a certified translation.

If official copies of the student's academic record cannot be forwarded, please indicate the reasons.

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What is the grading scale (from high to low) used at your academic institution?

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What is the median grade? \_\_\_\_\_ What is the lowest passing or satisfactory mark given? \_\_\_\_\_

If the student has failed or repeated a course, is this indicated on the academic record  Yes  No

Is the student's rank in class indicated on the academic record  Yes  No

If not, please approximate the student's rank and indicate the total size of the class.

Rank \_\_\_\_\_ Size of class \_\_\_\_\_

Does your institution award degrees with honors or with some other distinction  Yes  No

If yes, please indicate what honors or distinctions are awarded and the requirements for obtaining each.

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**Florida State University Law School/ LL.M. Program/ Tallahassee, FL 32306-1601 USA**

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