A.E.P. Student Referral Info

Unit Referring: ___________________________  Today’s Date: __________

Person Referring Student: __________________________

Name of Student: __________________________

Student Classification (circle one): 1L  2L  3L  LLM-LI  Visiting/Exchange

Reason(s) for Referral:

☐ Student needs assistance in one or more law classes: please specify: __________________________

☐ Student needs general academic support

☐ Student needs specific assistance with: time management; outlining tips; exam prep; exam-writing

☐ Other reason for referral: ______________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

*Received at A.E.P. on: ______________________  AEP Staff: ______________________