University of Wisconsin Law School Application for Admission

Exchange Programs

Please PRINT or TYPE all information requested.

		Applicant Inform	ation							
Full Name:										
	Last	First		Middle						
Current Address:										
	Street Address				Apartment/Unit #					
Permanent	City			State or Country	ZIP Code					
Address:										
	Street Address				Apartment/Unit #					
	City			State or Country	ZIP Code					
Phone:		Email								
Birth Date:		Place of Birth (City and Country):	Country of Citizenship:							
Gender	Male Female									
High School Education										
High School	:	City:								
				Month/						
Country:			Year of Graduation:							
		Undergraduate Edu	ication		_					
		Chuci Brudullo Bu								
College:		City:								
Country:		Major Field								
From:	То:	YES Did you graduate?	NO	Degree:						
College:		City:								
Country:		Major Field								

From:	To:	Y Did you graduate?		NO	Degree:					
College:		City:								
Country:		Major Field								
From:	То:	YI Did you graduate?		NO □	Degree:					
Disclaimer and Signature										
I certify that my answers are true and complete to the best of my knowledge.										
Signature:					Date:					