

Office of Student Affairs & Registrar Student Academic Record Request

First Middle Last
UGA Identification number (810#):
Law School Graduation year:
I am requesting a (choose one):
(a) Copy of law school application
(b) Enrollment verification
(c) Letter of good standing
(d) Other
Number of copies needed (limit of 5 per day):
Please mail to:

or
Please hold for pick up (will be held for 3 weeks):
By signing below, I hereby consent to and authorize the School of Law to release of the documents outlined above to myself or the person or office named on this form.
Signature:
Date: