

Letter/Document Request Form

Office of Student Services

100 N. Tucker Blvd., Room 1008
St. Louis, MO 63101
Phone: 314-977-3675

Student Name: _____ Student Email Address: _____ Student Phone Number: _____

Address Letter to (Name and/or Institution): _____

PURPOSE OF LETTER:

- Financial Aid/Scholarship
- Insurance
- Employment
- Application to a Dual Degree Program
- Transfer Application to Another Law School
- Visiting Status at Another Law School (approval needed)
- Other (specify): _____

INFORMATION TO BE INCLUDED IN LETTER:

- Verification of Full-time Status (12 credit hours required to be full time)
- Statement of Good Academic Standing
- Class Ranking
- Anticipated Graduation Date
- Other (specify): _____

DOCUMENTS TO BE INCLUDED WITH LETTER (specify): _____

If an official transcript is needed, it must be requested online through the University. Instructions for this process are at: <https://www.slu.edu/law/academics/registrar/index.php>.

MAILING INSTRUCTIONS:

- Student to pick up in the Student Services Office
- Email to: _____
- Regular mail to: _____

PLEASE INDICATE THE DATE NEEDED TO BE RECEIVED BY: _____

Student Signature _____ Date _____

Please return completed form to Dean of Students Jon Baris in the Student Services Office or by e-mail to jon.baris@slu.edu.

STUDENT SERVICES OFFICE USE ONLY

Date completed: _____ Completed by: _____

Comments: _____