Transfer Out Application

Date ________________

Name ___________________________ UB Person Number ________________________
(Please print)

UB email address_________________________ Phone # ________________________

Attach a statement explaining why you are considering transferring from UB Law School. In your explanation, please include any experiences during your time at UB that led you to consider transferring, or any opportunities at transfer schools that you do not think are available to you at UB.

Transcripts will not be processed until all grades have been submitted. Transferring schools do not normally process applications with incomplete transcripts.

All Holds (Traffic, Financial) must be removed before transcripts can be processed.

Sign here to authorize the release of your transcript ________________________________

For office use only:

Date ________________ Number_______ of Transcript(s) Processed

Date ________________ Number_______ of Letter(s) of Good Standing Processed

Date ________________ Number_______ of LSAC Report(s) Processed
Schools for Transfer

Name ________________________________  UB Person No __________________

1. Documents Required: (Check pertinent documents)
   Transcript _____  Letter of Good Standing _____  LSAC Report _____  Other ______
   Name of School ____________________________________________________________
   Office _________________________________________________________________
   Attention ______________________________________________________________
   Street _________________________________________________________________
   Street _________________________________________________________________
   City ___________________________  State ___________  Zip Code ____________

2. Documents Required: (Check pertinent documents)
   Transcript _____  Letter of Good Standing _____  LSAC Report _____  Other ______
   Name of School ____________________________________________________________
   Office _________________________________________________________________
   Attention ______________________________________________________________
   Street _________________________________________________________________
   Street _________________________________________________________________
   City ___________________________  State ___________  Zip Code ____________

3. Documents Required: (Check pertinent documents)
   Transcript _____  Letter of Good Standing _____  LSAC Report _____  Other ______
   Name of School ____________________________________________________________
   Office _________________________________________________________________
   Attention ______________________________________________________________
   Street _________________________________________________________________
   Street _________________________________________________________________
   City ___________________________  State ___________  Zip Code ____________

4. Documents Required: (Check pertinent documents)
   Transcript _____  Letter of Good Standing _____  LSAC Report _____  Other ______
   Name of School ____________________________________________________________
   Office _________________________________________________________________
   Attention ______________________________________________________________
   Street _________________________________________________________________
   Street _________________________________________________________________
   City ___________________________  State ___________  Zip Code ____________

5. Documents Required: (Check pertinent documents)
   Transcript _____  Letter of Good Standing _____  LSAC Report _____  Other ______
   Name of School ____________________________________________________________
   Office _________________________________________________________________
   Attention ______________________________________________________________
   Street _________________________________________________________________
   Street _________________________________________________________________
   City ___________________________  State ___________  Zip Code ____________