

**UNIVERSITY AT ALBANY
STATE UNIVERSITY OF NEW YORK
APPLICATION FOR 3+3 LAW PROGRAM**

NAME _____
Last First M.I.

SS# _____

ADDRESS _____
Number and Street

_____ City State Zip Code

TELEPHONE (____) _____
area code

NAME OF HIGH SCHOOL _____

RANK IN YOUR HIGH SCHOOL GRADUATION CLASS:

MY RANK IS _____ OUT OF _____ # in class

CURRENT G.P.A. _____ RANK IS _____ OUT OF _____ # in class
AS OF _____
(date rank figured)

CEEB Scores: Date of Exam _____
Verbal Score _____
Math Score _____

INTENDED COLLEGE MAJOR: _____
name of subject in which you plan to major

OPTIONAL
ETHNIC IDENTIFICATION _____
MINORITY _____ yes _____ no

I hereby authorize the University at Albany, SUNY office of Undergraduate Admissions to release my records to appropriate individuals at the University at Albany, SUNY, and Albany Law for the purpose of consideration for the 3 + 3 Law School Program.

Signature

Date

ESSAY
Attach to this form a one to two page personal statement of your reasons for seeking admission to this program and any additional information about yourself, your experience, or your reasons for wanting to study law which you believe might be helpful to the admissions committee in evaluation of your application.

DEADLINE: APPLICATIONS MUST BE POSTMARKED BY MAY 17, 2010

PRELAW – ASC/US – LI 36
SUNYA
1400 Washington Avenue
Albany, NY 12222