Registrar's Office

Widener University Delaware Law School

Request Form for Students/Alumni

Student Name (print): Student ID# or last 4 digits of SSN:			Former/Maiden Name:				
			Daytime Telephone: ()				
Academic Program:	Juris Doctor I	LLM Bridg	ge MJ _	DL	SJD _	No DegreeLEI	
Currently Enrolled (c	ircle): YES or NO	Graduation Dat	e or Anticipa	ted Gradu	ation Dat	e:	
	Processing: ———————————————————————————————————						
	Career Development Graduate/Professiona	al School	Personal l	Records/O	ther	Transfer	
To help us understand the need	ds of our students, pleas						
Other Requests: Copy of Course SchGrade Report - IndiLSAC Report [top paWidener University Method to Deliver RequesteePick-up by student/ai	Standing Inding with Class Rank Indicate term: Indicate term: Inge only; includes LSAT score Indicate Law School Application	Other (e(s)] On (includes adden	specifics to in	Othe	r:	May Concern"	
Student Signature				Date_			
Requests are processed within 2 required. Submit this form in p	-	=		_			
For Office Use Only: Date Rec	eived:	Date Processed:		Proce	essed by: _	Form revised on 9/6/20	