

I understand that Federal law provides me, after enrollment, with a right of access under certain circumstances to this Dean's Certification Form and that no school may require me to waive this right.

I hereby  waive  do not waive my right of access to this Dean's Certification Form.

Date \_\_\_\_\_ Signature \_\_\_\_\_

L \_\_\_\_\_  
LSAC Account No.

# Stanford Law School

## DEAN'S CERTIFICATION FORM

PLEASE BE ADVISED that \_\_\_\_\_  
(LAST NAME) (FIRST NAME) (MIDDLE NAME)

is an applicant to Stanford Law School. You will greatly assist this applicant and the School by providing specific and candid answers to this inquiry. If your records reveal any useful information about the applicant's career at institutions attended previously, the School will appreciate receiving that information as well.

The information you provide will be treated as confidential except that the applicant may elect to retain the right of access (see waiver above). Both the applicant and the School will appreciate prompt completion of this form. Thank you for your cooperation.

### REQUIRED INFORMATION

1. Is the student currently in attendance at your school? \_\_\_\_\_ Has the student graduated from your school? \_\_\_\_\_ Is/was the student in good standing? \_\_\_\_\_ If not in good standing, please explain.

\_\_\_\_\_  
\_\_\_\_\_

2. Has the student been the subject of disciplinary action or proceedings (for misconduct) or of academic censure (for deficient scholarship)? \_\_\_\_\_ If so, please explain.

\_\_\_\_\_  
\_\_\_\_\_

### ADDITIONAL INFORMATION

We recognize that more often than not, administrative officials do not know students personally and must answer the required information largely on the basis of their records. Room is provided for those who are acquainted with the student and wish to provide specific information as to scholastic honors, extracurricular activities, outside employment, etc. If available, please supply us with the student's cumulative academic rank in class. (Please use the reverse side, if this space is insufficient.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (please type or print) \_\_\_\_\_

Title \_\_\_\_\_

Institution \_\_\_\_\_

Address \_\_\_\_\_

PLEASE SEND THIS FORM DIRECTLY TO:  
STANFORD LAW SCHOOL, OFFICE OF ADMISSIONS, CROWN QUADRANGLE, 559 NATHAN ABBOTT WAY,  
STANFORD, CA 94305-8610  
[admissions@law.stanford.edu](mailto:admissions@law.stanford.edu)