Cambridge Summer Session Visiting Application Instructions:

University policy requires all non-University of Mississippi student participants in the Cambridge Summer Session to submit a Visiting Student Application. This application is due by APRIL 1, 2015.

PLEASE IGNORE THE INSTRUCTIONS PAGE OF THE APPLICATION THAT follows. YOU ARE NOT REQUIRED TO REGISTER WITH LSAC OR PAY A $40 APPLICATION FEE.

Please submit this application to:

The University of Mississippi School of Law
Cambridge Summer Session
481 Chucky Mullins Drive
University, MS 38677
Telephone: 662.915.6902

The University complies with all applicable laws regarding affirmative action and equal opportunity in all its activities and programs and does not discriminate against anyone protected by law because of age, color, disability, national origin, race, religion, sex, or status as a veteran or disabled veteran.
Application Instructions

APPLICATION DEADLINE

FOR SPRING 2015 TRANSFER** AND VISITING STUDENTS: November 30, 2014

CHECKLIST FOR APPLICANTS

1. Complete the University of Mississippi School of Law Transfer and Visiting Application. Applications should be submitted electronically through LSAC.org.
2. Application Fee—A $40 nonrefundable application fee should be submitted via LSAC.org.
3. Official transcript from the law school of record of all prior work. This transcript must come directly from the law school of record, not the applicant. This cannot be submitted electronically through LSAC. Please mail directly to our law school at the address listed below.
4. A letter from the dean of the law school of record stating the applicant is in good standing and the applicant’s class rank. This letter must come directly from the law school of record, not the applicant. This cannot be submitted electronically through LSAC. Please mail to the address listed below. For visiting applicants: this letter must also state that the hours accrued at the University of Mississippi School of Law will be applied toward the degree at the previous law school.
5. A photocopy of the Credential Assembly Service Law School Report submitted to the previous law school, including the undergraduate transcripts.
6. Statement of Purpose—The statement of purpose is important to your file. Please explain why you desire to transfer to or visit The University of Mississippi School of Law.
7. Academic Letters of Recommendation—A minimum of two (2) academic letters of recommendation from law professors who have taught you in class are strongly preferred. Your letters of recommendation should be submitted through the LSAC Letter of Recommendation Service.
8. Résumé—We require you to submit your résumé. Please account for any gaps in your résumé in an addendum.
9. Mississippi Residency Form IF claiming Mississippi residency
10. TOEFL (foreign applicants only, if applicable)
11. Register with Credential Assembly Service (CAS)—It is very important for applicants to become familiar with LSAC.org so you can monitor the activity of your application(s).

**Please note: In order to transfer, you must have completed two full semesters of law school (or the equivalency of your first year).

All correspondence to this Law School should be sent to the following address:

The University of Mississippi School of Law
Office of Law Admissions
481 Chucky Mullins Drive
University, MS 38677
Telephone: 662.915.5910

Visit the law school on the Web—http://www.law.olemiss.edu/

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Enrollment

Student Status:
___ Transfer
___ Visitor

Have you previously applied to this law school?
___ Yes
___ No

If you applied previously, for what year was the application made?

________________________

If you applied previously, what was the outcome of your application?

________________________

________________________

________________________

Biographical

Prefix ______________________  Date of birth ______________________

First name ___________________  Place of birth: City ________________

Middle name __________________  Place of birth: Country __________

Last name _____________________  Place of birth: State/Province ______

Suffix ________________________  Gender ______________________

Previous (other) name ___________  Social security number ________

Preferred first name ____________  LSAC account number __________
Demographics

Citizenship

___ Non-Resident Alien
___ US Citizen
___ US Permanent Resident

Country of citizenship ________________________

Visa/SEVIS number __________________________

Permanent resident number __________________

Permanent city ______________________________

Permanent state/province ____________________

Permanent country __________________________

Native language ______________________________

Ethnicity

Are you Hispanic or Latino
___ Yes
___ No

What is your race? Select one or more races to indicate what you consider yourself to be.

Aboriginal or Torres Strait Islander Australian
___ Aboriginal/Torres Strait Isl. Australian

American Indian or Alaska Native
___ American Indian/Alaskan Native

Asian
___ Asian

Black or African American
___ Black/African American

Canadian Aboriginal
___ Canadian Aboriginal

Caucasian/White
___ Caucasian/White

Hispanic/Latino
___ Hispanic/Latino

Native Hawaiian or Other Pacific Islander
___ Native Hawaiian/Other Pacific Islander
Demographics continued

Puerto Rican

___ Puerto Rican

Consent

___ Decline to respond

Tribal Affiliation

Tribal affiliation or village name

Enrollment number (enrolled members only)

Contact Information

Current Address

Country

Street address--line 1

Street address--line 2

Street address--line 3

City

State/province

Zip/postal code

Current mailing address good until date

Day phone

Evening phone

Permanent Address

Country

Street address--line 1

Street address--line 2

Street address--line 3

City

State/province

Zip/postal code

Permanent mailing address good until date

Day phone

Evening phone
Contact Information continued

Other Contact Information
Primary e-mail address ________________________________
Secondary e-mail address ________________________________
Permanent e-mail address ________________________________
Mobile phone _________________________________________

The University of Mississippi School of Law can send text messages to my mobile phone
____ Yes
____ No

Family
Next of Kin/Emergency Contact
Salutation _____________________________________________
First (given) name ________________________________
Middle name/initial ________________________________
Last (family) name ________________________________
Relationship to applicant ________________________________
Telephone (include area code) ___________________________

Country _____________________________________________
Street address--line 1 ________________________________
Street address--line 2 ________________________________
Street address--line 3 __________________________________
City ________________________________
State/province ________________________________
Zip/postal code ________________________________

If you have any close relatives who have been students at this university, please provide the following information.

Relative 1
____ Law school ______ University
First (given) name ________________________________
Middle name/initial ________________________________
Last (family) name ________________________________
Relationship to applicant ________________________________
School attended ________________________________
Start date (month/year) ________________________________
End date (month/year) ________________________________
Degree awarded ________________________________

Relative 2
____ Law school ______ University
First (given) name ________________________________
Middle name/initial ________________________________
Last (family) name ________________________________
Relationship to applicant ________________________________
School attended ________________________________
Start date (month/year) ________________________________
End date (month/year) ________________________________
Degree awarded ________________________________
Family continued

Parent/Guardian - 1

Choose not to answer

Deceased

First (given) name ____________________________

Middle name/initial ____________________________

Last (family) name ____________________________

Occupation ____________________________

Highest level of education ____________________________

Country ____________________________

Street address--line 1 ____________________________

Street address--line 2 ____________________________

Street address--line 3 ____________________________

City ____________________________

State/province ____________________________

Zip/postal code ____________________________

Parent/Guardian - 2

Choose not to answer

Deceased

First (given) name ____________________________

Middle name/initial ____________________________

Last (family) name ____________________________

Occupation ____________________________

Highest level of education ____________________________

Country ____________________________

Street address--line 1 ____________________________

Street address--line 2 ____________________________

Street address--line 3 ____________________________

City ____________________________

State/province ____________________________

Zip/postal code ____________________________

Education

List ALL educational institutions attended.

Institution type  ____ High School  ____ Undergraduate  ____ Graduate  ____ Law  ____ Other Post Graduate

Institution name ____________________________

Major ____________________________

Country ____________________________ Start date ____________________________

State/Province ____________________________ End date ____________________________

City ____________________________ Degree ____________________________

GPA ____________________________ Date degree granted ____________________________

Rank ____________________________
**Education continued**

Institution type _____ High School _____ Undergraduate _____ Graduate _____ Law _____ Other Post Graduate

Institution name ____________________________________________________________

Major ___________________________________________________________________

Country __________________________________________ Start date ______________

State/Province ____________________________________________ End date ______________

City __________________________________________________________________________

Degree ______________________________________________________________________

GPA __________________________________________________ Date degree granted _____________

Rank ________________________________________________________________________

Institution type _____ High School _____ Undergraduate _____ Graduate _____ Law _____ Other Post Graduate

Institution name ____________________________________________________________

Major ___________________________________________________________________

Country __________________________________________ Start date ______________

State/Province ____________________________________________ End date ______________

City __________________________________________________________________________

Degree ______________________________________________________________________

GPA __________________________________________________ Date degree granted _____________

Rank ________________________________________________________________________

Institution type _____ High School _____ Undergraduate _____ Graduate _____ Law _____ Other Post Graduate

Institution name ____________________________________________________________

Major ___________________________________________________________________

Country __________________________________________ Start date ______________

State/Province ____________________________________________ End date ______________

City __________________________________________________________________________

Degree ______________________________________________________________________

GPA __________________________________________________ Date degree granted _____________

Rank ________________________________________________________________________

Have you ever attended any law school?

_____ Yes

_____ No
**Education continued**

Did you leave the law school under less than good standing?

___ Yes
___ No

List the academic honors, awards, or other recognitions you have received and explain the reason(s) upon which awards were made.

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**Standardized Testing**

**LSAT**

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**TOEFL**

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**IELTS**

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Residency
Are you claiming Mississippi residency?

_____ Yes
_____ No

If you are claiming Mississippi residency, you must complete the downloadable residency form.

If "yes," number of years?

________________________________________

If "yes," which county?

________________________________________

Military
Have you served or are you now serving on full-time, active US military duty?

_____ Yes
_____ No

Date of entrance (month/year) _______________________

Date of discharge (month/year) _______________________

Rank _______________________

Expected military reserve or National Guard status during law school

________________________________________

Branch _______________________

Discharge type _______________________

Have you ever been separated from any branch of the US armed forces under less than honorable conditions?

_____ Yes
_____ No

If you have been separated from any branch of the US armed forces under less than honorable conditions, explain the circumstances.

________________________________________

________________________________________

________________________________________
Character & Fitness

Because of the high ethical standards to which lawyers are held, the failure to disclose an act or event such as the ones described below is often more significant, and leads to more serious consequences, than the act or event itself. Failure to provide truthful answers, or failure to inform the Office of Admissions of any changes to your answers, may result in revocation of admission or disciplinary action by the School of Law, or denial of permission to practice law by the state in which you seek admission to the bar. We strongly urge, if you are unsure as to whether to make a disclosure, you err on the side of disclosure. Please note: it is your responsibility to update your application by notifying the University of Mississippi Office of Law Admissions if any criminal charges are filed or expected to be filed between the date you submit this application and the date you enroll at the University of Mississippi School of Law. If the answer is "yes" to any of the questions listed below, give dates and complete details in a separate attachment.

Please check that you have read the above paragraph.

____ I have read the above statement.

Have you ever been expelled, suspended, or dismissed from any college or university for any reason?
____ Yes
____ No

Have you ever been subject to disciplinary action for academic or other reasons in any of the colleges, universities, or professional schools you have attended, or by any licensing body or professional society?
____ Yes
____ No

Are there any disciplinary charges (academic or other) currently pending or expected to be brought against you by any college, university, professional school, licensing body, or professional society?
____ Yes
____ No

Have you ever been admitted to practice law in any jurisdiction?
If "yes," please detail the jurisdiction and date of admission on a separate attachment. If your right to practice has been withdrawn, please explain.
____ Yes
____ No

Has your education in college, university, or professional school been interrupted for one term or more for any reason?
____ Yes
____ No

Have you ever been charged with, arrested for, convicted of, or pleaded guilty or nolo contendere to a violation of any law? This includes minor traffic violations, charges of driving under the influence, or any other drug- or alcohol-related offenses and any expunged offenses. You should also disclose offenses which resulted in purged, sealed, obliterated, dismissed or destroyed records, regardless of whether you have been told that you need not disclose any such event. These will also be requested by state bar authorities in many states.
If "yes," please attach a statement explaining the circumstances of each incident, whether such incident is still pending, and if not, its resolution. You should also be very specific about the dates of any incidents and the dates of resolution of said incidents.
____ Yes
____ No
Certification

By submitting this application electronically, I certify that the information provided by me on this application is complete and accurate to the best of my knowledge and belief. I understand that falsifications, misrepresentations, or omissions on the application may be grounds for denial; or, if I am accepted, for suspension or dismissal from the Law School or revocation of an offer of admission or degree. I understand that I have a continuing duty to disclose (within 5 days) any changes in any of the facts indicated on this application after the filing of the application and through my graduation from this law school. Failure to do so may result in dismissal from the Law School or other appropriate action.

I agree with the above statement.

The University complies with all applicable laws regarding affirmative action and equal opportunity in all its activities and programs and does not discriminate against anyone protected by law because of age, color, disability, national origin, race, religion, sex, or status as a veteran or disabled veteran.