

**CUNY SCHOOL OF LAW**  
**RECORDS REQUEST FORM**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

If in attendance under another name, indicate name: \_\_\_\_\_

8-Digit CUNYfirst ID: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Currently in Attendance?    Yes            No            Year Entered the Law School: \_\_\_\_\_

Graduated from CUNY School of Law?    Yes            No            If yes, date: \_\_\_\_\_

**Signature:** \_\_\_\_\_

(Required as authorization to issue records)

Check the appropriate box to request a copy of the following:

\_\_\_ Law School Application/Addendum

\_\_\_ Personal Statement

\_\_\_ Resume

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**RECORDS OFFICE ACTION ONLY**

**Date Provided: Law School Application/Personal Statement/Resume** \_\_\_\_\_