

University of California College of the Law San Francisco
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San Francisco, CA 94102
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EXCHANGE STUDENT APPLICATION

Instructions: *Please complete this form and e-mail it to the address shown above along with your current resume, transcripts and a personal statement.*

Name:

Address:

Telephone:

School:

Email Address:

Gender: Male Female

Date of Birth (Month/Day/Year):

City of Birth: **Country of Birth:**

Country of Citizenship:

Semester you wish to attend UC Law SF: Fall Spring Year

Comments: *(Please indicate any special needs you may have or anything you would like to bring to our attention.)*

By checking this box I certify that all of the information in my application is accurate and true.