

Institute for the Global Practice of Law

Summer 2011 Application

| | | |
|--------------------------------------|-------------------|-----------------|
| Name: | | |
| BUSINESS INFORMATION | | |
| Title: | | |
| Firm/Company: | | |
| Business Address: | | |
| City: | | |
| Country: | | |
| Work Telephone: | Work Fax: | |
| Work Email: | | |
| PERSONAL INFORMATION | | |
| Home Address: | | |
| City: | | |
| Country: | | |
| Home Telephone: | Mobile Telephone: | |
| Personal Email: | | |
| Education (College/Graduate School): | | |
| Location: | Degree: | Year Conferred: |

| EMPLOYMENT HISTORY | | |
|---|------|--------|
| Employment History: | | |
| Professional Activities: | | |
| Country of Citizenship: | | |
| Date of Birth | Male | Female |
| EMERGENCY CONTACT INFORMATION | | |
| Person to Notify in Case of Emergency: | | |
| Name, Address, Telephone, Email, Relationship to You: | | |

I confirm that the information contained in the applications materials is true. I will be responsible for observing satisfactory academic and professional standards, for maintaining a proper standard of personal conduct, and will be personally liable for all debts and obligations personally incurred. I will obey all laws of the United States and the State of Ohio.

Signature: _____ Date: _____

Return to:

University of Cincinnati
College of Law

Attn: Institute for the Global Practice of Law

PO Box 210040

Cincinnati, OH 45221-0040 USA

Phone: 1-513-556-6805

EMAIL: **IGPL@law.uc.ed**