



## Application Instructions

Any student who is currently attending a law school that is accredited by the American Bar Association (ABA), and is in good academic standing with that school, is eligible to apply as a non-matriculating or visiting student. Visiting students must have permission from the Dean of their current law school to take courses at the law school. Applicants must submit the following materials:

1. A completed visiting student application
2. An official transcript of all prior law school coursework sent directly from the school to the Office of Admissions;
3. A letter of good standing from the home law school clearly stating that credit for classes undertaken at the law school will be applied to the applicant's degree at their home school.

Note: Any supporting documentation should be sent to to [admissions@johnmarshall.edu](mailto:admissions@johnmarshall.edu).

In addition to a bar examination, there are character, fitness, and other qualifications for admission to the bar in every U.S. jurisdiction. Applicants are encouraged to determine the requirements for any jurisdiction in which they intend to seek admission by contacting the jurisdiction. Addresses for all relevant agencies are available through the National Conference of Bar Examiners.

Office of Admissions  
Atlanta's John Marshall Law School  
1422 West Peachtree St. NW  
Atlanta, GA 30309  
Phone : 678.916.2620 Fax : 404.581.5565  
[admissions@johnmarshall.edu](mailto:admissions@johnmarshall.edu)



## Division

Please select the appropriate division:

- Full-Time  
 Part-Time Day  
 Part-Time Eve

## Degree Applied

Please select the campus you are applying to.

- Atlanta's John Marshall Law School

## Biographical

Prefix \_\_\_\_\_

First name \_\_\_\_\_

Middle name \_\_\_\_\_

Last name \_\_\_\_\_

Suffix \_\_\_\_\_

Previous (other) name \_\_\_\_\_

Preferred first name \_\_\_\_\_

Date of birth \_\_\_\_\_

Place of birth: City \_\_\_\_\_

Place of birth: Country \_\_\_\_\_

Place of birth: State/Province \_\_\_\_\_

Gender \_\_\_\_\_

Social security number (last 4 digits) \_\_\_\_\_

LSAC account number \_\_\_\_\_

## Demographics

### **Citizenship**

Citizenship

- Non U.S. Resident  
 Non-Resident Alien  
 US Citizen  
 US Permanent Resident

Country of citizenship \_\_\_\_\_

Visa type \_\_\_\_\_

Visa/SEVIS number \_\_\_\_\_

Permanent resident number \_\_\_\_\_



## **Demographics continued**

Permanent city \_\_\_\_\_

Permanent state/province \_\_\_\_\_

Permanent country \_\_\_\_\_

### **Ethnicity**

Are you Hispanic or Latino?

Yes

No

If you selected 'Yes' to the above question, select an ethnicity.

Hispanic/Latino

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/Indigenous**

Canadian Aboriginal/Indigenous

### **Caucasian/White**

Caucasian/White

### **Native Hawaiian or Other Pacific Islander**

Native Hawaiian/Other Pacific Islander

### **Puerto Rican**

Puerto Rican

### **Consent**

Decline to respond



## **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 \_\_\_\_\_

### **Other Contact Information**

Primary e-mail address \_\_\_\_\_

Secondary e-mail address \_\_\_\_\_

Mobile phone \_\_\_\_\_

Atlanta's John Marshall Law School can send text messages to my mobile phone.

\_\_\_\_ Yes

\_\_\_\_ No



## 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 \_\_\_\_\_

---

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 \_\_\_\_\_

---



## 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 \_\_\_\_\_

---

## Visiting

Please name the degree-granting school:

\_\_\_\_\_

Expected date of graduation:

\_\_\_\_\_

## Courses

Please list the courses, and sections, you are interested in visiting. This information can be found on the current semester schedule on our website or in the Office of Admissions. Please note that AJMLS students will be given first priority in class selection.

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



## **Certification**

By electronically transmitting this application, I certify that the information provided in this application and in attached materials is true and complete to the best of my knowledge. In submitting this application, I indicate my willingness to accept and adhere to the Code of Student Responsibility, and recognize that I will be subject to the procedures and regulations of the Law School. For more information regarding the Law School's policy on disability accommodations, please see Section 507 of the Dean's Office regulations, which can be accessed online at [www.johnmarshall.edu](http://www.johnmarshall.edu).

---

Please type your name here:

---

Date:

---