

**DUQUESNE UNIVERSITY SCHOOL OF LAW**

**APPLICATION FOR ADMISSION  
LLM (MASTER OF LAWS) PROGRAM FOR FOREIGN LAWYERS**

Please type or print all entries in ink:

*(Applications must be received no later than April 30<sup>th</sup> of the year in which applicant wishes to enter the LLM Program.)*

Biographical Information:

Family Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_  Mr. \_\_\_\_\_  
 Dr. \_\_\_\_\_  Ms. \_\_\_\_\_  
 Other (please specify) \_\_\_\_\_

U.S. Social Security Number (if any): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth: month \_\_\_\_\_ / day \_\_\_\_\_ / year \_\_\_\_\_

County of Citizenship: \_\_\_\_\_

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Country of Permanent Legal Residence: \_\_\_\_\_

Position/Occupation in Country of Permanent Legal Residence: \_\_\_\_\_ (e.g., student, professor, etc.)

Current Mailing Address:

Street Address \_\_\_\_\_  
City, State/ Province \_\_\_\_\_  
Country and Postal Code \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Address in Home Country:

Street Address \_\_\_\_\_  
City, State/Province \_\_\_\_\_  
Country and Postal Code \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Address to which Visa Documents should be sent:

Street Address \_\_\_\_\_  
City, State/Province \_\_\_\_\_  
Country and Postal Code \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Please attach a photocopy of your License to Practice and a transcript of your University studies in law..

Please attach one (1) Letter of Recommendation from someone who can attest to your professional competency.

**AUTHORIZATION TO PRACTICE LAW**

Year initial authorization to practice law granted: (mm/dd/yyyy): \_\_\_\_\_

Please identify each jurisdiction in which you are authorized to practice law and provide certification for same.

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Have you ever had your license to practice law suspended?  No  Yes If yes, please explain: \_\_\_\_\_

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Have you ever been disbarred?  No  Yes If yes, please explain: \_\_\_\_\_

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Have you ever been expelled, dismissed, suspended or disciplined by any college or university, including any law school?

No  Yes If yes, please explain \_\_\_\_\_

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Have you ever been arrested or charged with any criminal offense other than a minor traffic violation?  No  Yes

If yes, please explain \_\_\_\_\_

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**Immigration Information:**

**\*You must include a photocopy of your passport with your application**

*If you are currently **INSIDE** the United States, please complete the following:*

Current Visa Classification: \_\_\_\_\_ Current Sponsor/School: \_\_\_\_\_

Date of Initial Entry into United States (mm/dd/yyyy): \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

I-94 Expiration Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (If D/S, check here: )

(NOTE: You must attach supporting documentation verifying current visa classification, e.g., Form I-20, Form IAP-PP or DS-2019, Form I-797, etc.)

If you are currently **OUTSIDE** the United States, please complete the following:

City/Country where you will apply for the required visa: \_\_\_\_\_

**Dependent Information:**

For each dependent who will accompany you to the U.S., please provide the following information. Use additional sheet if necessary. Please note that a dependent is defined as your spouse and/or any unmarried children under 21 years of age.

1) Gender:  Female       Male      Relationship: \_\_\_\_\_  
Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
Date of Birth (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_ City & Country of Birth: \_\_\_\_\_  
Country of Citizenship: \_\_\_\_\_ Country of Residence: \_\_\_\_\_

2) Gender:  Female       Male      Relationship: \_\_\_\_\_  
Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
Date of Birth (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_ City & Country of Birth: \_\_\_\_\_  
Country of Citizenship: \_\_\_\_\_ Country of Residence: \_\_\_\_\_

3) Gender:  Female       Male      Relationship: \_\_\_\_\_  
Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
Date of Birth (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_ City & Country of Birth: \_\_\_\_\_  
Country of Citizenship: \_\_\_\_\_ Country of Residence: \_\_\_\_\_

**ENGLISH PROFICIENCY**

Applicants for whom English is not the mother (native) language must submit official results of the **Test of English as a Foreign Language (TOEFL)**.

Most recent TOEFL Score: \_\_\_\_\_ Date: \_\_\_\_\_ Registration Number: \_\_\_\_\_

**STATEMENT OF PROFESSIONAL AND EDUCATIONAL GOALS**

On a separate sheet of paper, please attach a narrative statement of your plans regarding employment or study after the LLM Program. Include any information that might be helpful in assessing your application, including personal history, special interests, and abilities not otherwise reflected on this application form. Please sign your name and the date at the end of this statement to certify that the statement is true and is the product of your own work.

**EDUCATION**

List all academic post-secondary institutions you have attended. Include universities, graduate schools, and law schools. State all post-secondary degrees, diplomas, or certificates you have received or expect to receive from these institutions.

**NOTE: Applicant must submit original or certified copies of all post-secondary academic documents.**

Institution/Location      Attendance (from – to)      Certification of Completion or Degree/Diploma & Date Awarded

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(For the following, use a separate sheet of paper if necessary.)

Scholastic honors you have received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Memberships in scholastic honor societies: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Scholarly publications and major published dissertations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Major unpublished dissertations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Principal extracurricular activities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROFESSIONAL EXPERIENCE**

List only experience in law or law-related fields and any full-time employment, if it lasted a year or more. If not employed, indicate current full-time activity.

Present employment or other  
current full-time activity: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
\_\_\_\_\_ Fax: \_\_\_\_\_  
\_\_\_\_\_

Previous  
Employment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other relevant  
experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

Enter the names and address of three people whom we may contact for recommendations. The Duquesne University School of Law prefers persons for whom you have worked in a professional capacity. As these recommendations are essential to the evaluation process, **Duquesne University School of Law will not consider your application without contact details for these persons.** All referees must be able to communicate in English.

- 1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any material misstatement on this application or its accompanying documents for any forms of dishonesty, including fraudulent practices relating to entrance examinations, will result in disqualification for admission, and if discovered after admission will result in immediate dismissal from Duquesne University School of Law. It is a condition of admission that entering students agreed to support the Code of Academic Integrity in force in the school, and by signing this application, you so agree.

I certify that all of my responses to the application questions are true and I am the author of any information that is directly requested of me. I understand that my acceptance and matriculation may be cancelled if any information provided by me in support of my application is found to be false.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Notice of Nondiscrimination and Nonharassment Policy**

Duquesne University, motivated by its Catholic identity, values, equality of opportunity, human dignity, racial, cultural and ethnic diversity, both as an educational institution and as an employer. Accordingly, the University prohibits and does not engage in discrimination or harassment on the basis of race, color, creed, religion, national origin, sex, sexual orientation (exclusive of conduct), age (except as provided by law), disability or status as a veteran or disabled veteran. Further, Duquesne University will continue to take affirmative steps to support and advance these values consistent with the University’s mission. This policy applies to all programs and activities of the University, including, but not limited to, admission and employment practices, educational policies, scholarship and loan programs, and athletic or other University-sponsored programs. This is a commitment by the University in accordance with its religious values and applicable federal (Title VI, Title IX and Section 504), state and local laws and regulations. Nothing herein, however, shall be interpreted as a waiver by Duquesne University of its own Constitutional and legal rights based upon its religious affiliation. The person responsible for coordinating its efforts under this policy and its obligations under Title IX and Section 504 and their implementing regulations is Dr. Judith Griggs, Affirmative Action Officer, Ground Floor, Administration Building, University Extension 6661.

**DUQUESNE UNIVERSITY SCHOOL OF LAW  
RECOMMENDATION FORM  
LLM (MASTER OF LAWS) FOR FOREIGN LAW GRADUATES**

**To the Applicant**

1. Request that the person completing this form enclose it in an envelope you provide, seal it, and mail it to:

LLM Admissions Committee  
Duquesne University School of Law  
234 Murray Pavilion  
900 Locust Street  
Pittsburgh, Pennsylvania 15282-0700  
U.S.A.

2. Under the provisions of the Family Educational Rights and Privacy Act of 1974 (P.O. 93-380), a student has access to all files pertaining to him or her with the exception of those documents to which (s)he has waived right of access.

- I waive my right to examine the following recommendation.
- I do not waive my right to examine the following recommendation.

**Full Name:** \_\_\_\_\_ **Signature of Applicant:** \_\_\_\_\_  
(Please print or type)

**To the Person Acting as Reference**

The applicant named above has asked you to serve as a reference for admission to the Duquesne University LLM Program.

- Competent evaluation is important both to the candidate and to the program. Candor in your comments is essential to fairness to both parties. Please do not make any statements that would indicate the applicant's race, creed, or national origin.
- This form is designed to provide an efficient way for you to assess the applicant's overall potential for study in U.S. law.

How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

In comparison with other individuals at the same stage in their career, how would you rate the applicant on the following dimensions?

	Top 5%	Top 10%	Average	Below Average	Can't Assess
Ability to analyze a problem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgment and maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quantative skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to conduct research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Breadth of knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

