Duquesne University
School of Law

Upper Level Writing Requirement/Independent Research Completion Form

Please select one:

☐ Independent Research + Upper Level Writing Requirement

☐ Upper Level Writing Requirement **only**

☐ Independent Research **only** (paper will **not** be use to fulfill Upper Level Writing Requirement)

This document certifies that _____ has **fulfilled** the
NAME (Print)

above checked category with _____ during the
PROFESSOR NAME

☐ Fall Semester _____. ☐ Spring Semester _____.
YEAR YEAR

Please circle current student status: 2D 3D 2E 3E 4E 2P 3P 4P

_____
Student Signature Date

_____
Student E-Mail Address

This Section to be Completed by Faculty member:

_____
Faculty Signature

_____
Course

_____
Topic

_____
Grade Date

- **Faculty signature confirms that the student has met all specifications as stated on pages 37 and 28 and/or on page 84 of the *Academic Bulletin*.**
- **The student must submit one original and one copy of his or her work to the supervising faculty member. The copy is for the Law Library, and the original is stored with exams.**
- **The Registrar must receive this signed form from the supervising faculty with the appropriate grade.**