Professional Development

APPLICATION FOR ADMISSION

OSGOODE

OSGOODE HALL LAW SCHOOL

Single Course Enrollment without Assessment/Audit *Individuals applying in this category are not eligible for advanced standing towards a Professional LLM *Individuals are not admitted as students to York University nor will there be a university transcript of the course(s) taken.

Confirmation of attendance will be provided by Osgoode Professional Development, if requested.

PERSONAL AND EMPLOY	MENT INFORMATION				
Mr. Ms. Mrs. D	r. SURNAME	FIRST NAME		MIDDLE NAME	
PHONE (HOME)	PHONE (WORK)	E-MAIL		·	
FIRM/ORGANIZATION/EMPLOYER		AREA OF PRACTICE TITLE			
ADDRESS		CITY	PROVINCE/STATE	POSTAL CODE	COUNTRY
YEAR OF CALL	JURISDICTION	BAR MEMBERSHIP NUMBER			
IF YOU PREFER THAT WE USE YOUR	HOME ADDRESS FOR CORRESPONDENCE AND COMMUNICATION, PLEASE T	ICK HERE 🗖 AND COMPLETE THE FOLLOWING			
HOME ADDRESS			NCE/STATE POSTAL CO	STATE POSTAL CODE COUNTRY	
EDUCATIONAL HISTORY					
Please list the post-secondary	y institutions attended (starting with the most recent).				
1. Name and Location of Institution		Degree Conferred		From: Year/Month	To: Year/Month
					/
2. Name and Location of Institution		Degree Conferred		From: Year/Month	To: Year/Month
3. Name and Location of Institution		Degree Conferred		/ From: Year/Month	To: Year/Month
				/	/
COURSE SELECTION					
Please indicate the LLM cours	e in which you wish to enroll.				
1. Course Name and Title			Credit Va	lue	Term (Fall, Winter, Summer)
2. Course Name and Title			Credit Value Term (Fa		Term (Fall, Winter, Summer)
3. Course Name and Title			Credit Va	lue	Term (Fall, Winter, Summer)

STATEMENT OF INTEREST

Please describe your legal experience relevant to the LLM course(s) listed above and explain why you wish to audit this course.

Optional: If applicable, provide a link to your online profile or biography or e-mail your CV along with this application.[†] If necessary, please use a separate sheet for additional information.

SIGNATURE		
	Signature Date (dd/mm/yyyy)	Applicant's Signature
I hereby certify that all statements are correct and complete.		This represents your signature.
	/ /	

* When you press submit, this form will become an attachment to an e-mail where you can attach any additional relevant documentation.