FORM B

Tulane University
LAW SCHOOL

Applicant: Please print one copy of this form for each recommender. This form will not be transmitted electronically.

LETTER OF RECOMMENDATION FOR S.J.D.

TULANE LAW SCHOOL
Weinmann Hall, Suite 203
New Orleans, Louisiana 70118-6231
tel 504.865.5930 *fax* 504.865.6710

Note to candidate: Please complete Part I of this form, below, including the information about your recommender, who must be a current or former law professor. Deliver or mail this form to your recommender. Request that the completed form be placed in an envelope, sealed, and signed across the seal by the person completing the form. The sealed envelope may be returned to you, so that you can forward it to Tulane. Do not open the envelope or break the seal. Alternatively, the person completing the form may forward it directly to Tulane Law School Office of Admission. Recommenders may also use their own letterhead for letters of recommendation.

Part I.

Candidate's Name: _____
First *Middle* *Last*

Address: _____
Number, Street and Apartment

_____
City, State, if USA (Country, if not USA) and ZIP Code

I understand that federal legislation provides me with a right of access to this form which may be waived, but that no school or person can require me to waive this right.

A. ☐ I hereby waive my right of access to this form and authorize the person identified below to provide a candid evaluation to Tulane Law School.

_____ _____
Signature *Date*

B. ☐ I do not waive my right of access to this form, but I authorize the person identified below to provide a candid evaluation to Tulane Law School.

_____ _____
Signature *Date*

Name of Recommender/Title: _____

Address: _____

_____
City, State, if USA (Country, if not USA) and ZIP Code

Telephone number: _____ Fax number: _____

E-mail address: _____

Part II.

To the recommender: The S.J.D. program requires the submission of a lengthy thesis which makes a significant, original contribution to the study of law. Based upon your acquaintance with the candidate, do you believe that he or she can successfully complete this requirement?

Please provide any information about the candidate that you feel may be helpful to our determination. We are interested in your candid evaluation of the candidate's intellectual abilities and motivation to complete the Ph.D.

When you have completed this form, please place it in an envelope. Seal the envelope, and sign it across the seal. The sealed envelope may be returned to the student or may be mailed directly to us at:

Committee on S.J.D. Admission
Tulane Law School
Weinmann Hall, Suite 203
New Orleans, Louisiana 70118-6231

You may instead use your own letterhead for the letter of recommendation.

Tulane University
LAW SCHOOL

Complete, print out, and mail this form.
It will not be transmitted electronically.

REQUEST FOR US GOVERNMENT- SPONSORED OR GUARANTEED LOAN PROGRAMS

S.J.D. Program
Tulane Law School
Weinmann Hall, Suite 203
New Orleans, Louisiana 70118-6231
tel 504.865.5930 *fax* 504.865.6710

Please check one box only. I am a:

- ☐ citizen of the US, born in the US with social security # _____
- ☐ citizen of the US, born outside the US with social security # _____
- ☐ non-citizen national of the US with a US passport stamped "Non-citizen National"
- ☐ permanent resident of the US with Alien Registration Receipt Card (I-151 or I-551) # _____
- ☐ conditional permanent resident with I-151 Card # _____
- ☐ holder of a US Temporary Resident Card (I-688).
- ☐ holder of a US Arrival-Departure Record (I-94) showing one of the following: Cuban-Haitian Entrant, Indefinite Parole, Asylum Granted, Humanitarian Parole, Refugee
- ☐ family unity status recipient (I-797) with approved immigrant visa (I-797)

If no space above is checked, you are unfortunately not eligible for any of the US government-sponsored or government-guaranteed loan programs.

If any space above is checked, please sign here and complete page D-2 of this form.

_____ _____
Signature *Date*

Print Name: _____

If you checked any of the spaces on the previous page, please complete and return this form in order to receive information about loan programs. If we do not receive this form, we will assume that you do not wish to apply for loans and will not forward the appropriate materials.

1. Type Name:_____
First *Middle* *Last*

2. This form is a preliminary form which serves to begin the financial aid process at Tulane Law School. We will be in touch with you concerning additional forms to be completed and information needed. In particular, we require that the current FAFSA (Free Application for Federal Student Aid) form be submitted by every applicant for need-based aid. You may complete the FAFSA on-line at www.fafsa.ed.gov after January 1st of the year in which you will enroll. It is critical that the FAFSA form be submitted to the federal processing office by February 15th, so that we receive it at Tulane by March 15th (the definition of a timely application). Federal Perkins Loans are awarded only to timely applicants.

   Please type your name or initial to indicate that you have read this paragraph:_____

3. During the academic year, I will receive:

   ☐ Veteran's benefits

   ☐ Social Security benefits

   ☐ Vocational rehabilitation benefits

   ☐ a Faculty/Staff tuition waiver through Tulane University

   ☐ a loan, scholarship, stipend, or grant, NOT through Tulane Law School or its financial aid office; please identify:

   _____

4. I understand that I should research possible sources of outside scholarship funding and ramifications of educational debt at this time. Possible research sources include, but are not limited to:
   - *"The Access Advisor"* debt management software from The Access Group Program (free of charge; call 1.800.282.1550)
   - *"The Financial Aid Information Page"* on the World Wide Web (point your web browser to http://www.finaid.org/)
   - graduate scholarship directories in your local or college library's reference section
   - the department of education in your state of residence; request information on the availability of any loans

   Please type your name or initial to indicate that you have read the items above:_____

5. The information I have provided on this form is correct. I understand that I must submit a FAFSA form and arrange for Tulane to receive Financial Aid Transcripts in order to be considered for federal aid at Tulane Law School.

   _____ _____
   Signature *Date*

FORM E

Tulane University
LAW SCHOOL

Complete, print out, and mail this form. It will not be transmitted electronically.

STATEMENT OF ADEQUATE FUNDING

S.J.D. Program
Tulane Law School
Weinmann Hall, Suite 203
New Orleans, Louisiana 70118-6231
tel 504.865.5930 *fax* 504.865.6710

All international candidates must complete this form and return it with the statement of intent to enroll and an affidavit of support. Our receipt of these items is required before we can process I-20 or DS-2019 forms.

Please print or type all information on this form. Illegible or incomplete information will slow the visa process considerably. Note that signatures are required from yourself and your sponsor(s).

1. Your Name: _____
First *Middle* *Last*

Complete Mailing Address:

_____

_____
(Number, Street and Apartment)

_____ _____
City, State, if USA (Country, if not USA) and ZIP Code *Parish (LA residents only)* *Telephone (include country code or area code)*

2. Birth Date: ____ / ____ / ____ 3. Birth Place: _____
MM *DD* *YYYY* *City* *State* *Country*

4. Country of Citizenship: _____

5. Country of Permanent Residence: _____

6. Identify source(s) and amount of funds (in US dollars) that you will have available for your use per year while in the United States, given applicable exchange and currency regulations. Sources may include yourself, other family members, government agencies, educational agencies, businesses or corporations that accept responsibility for all or part of your living and educational expenses.

Amount: $_____ Source: _____

Amount: $_____ Source: _____

Amount: $_____ Source: _____

7. Attach an affidavit of support for each source of funds.

8. Please list below all persons who will be depending upon you for financial support during your enrollment here. Include their names, ages, and relationship to you.

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

9. Applicant's Certification:

I understand that the inclusion of false information on this form is grounds for revocation of admission and/or dismissal from the University, as well as revocation of any visa issued on the basis of this form. I attest by my signature that the information on this form is factually correct and honestly presented.

_____ _____

Signature *Date*

10. a. The information presented on this form concerning my sponsorship is accurate.

_____ _____

Sponsor Signature *Date*

b. The information presented on this form concerning my sponsorship is accurate.

_____ _____

Sponsor Signature *Date*

c. The information presented on this form concerning my sponsorship is accurate.

_____ _____

Sponsor Signature *Date*