



**THE JOHN MARSHALL LAW SCHOOL  
REQUEST FOR LETTER OF GOOD STANDING**

**\*DO NOT USE THIS FORM FOR TRANSFERS**

*Order a \*Transfer Packet*

Please return completed form to: [AcademicServices@jmls.edu](mailto:AcademicServices@jmls.edu) (room 211)

**Please print clearly:**

STUDENT NAME: \_\_\_\_\_

ID NO: \_\_\_\_\_

ANTICIPATED GRAD DATE: \_\_\_\_\_ HOURS COMPLETED: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_

PREFERRED EMAIL: \_\_\_\_\_

***I HEREBY REQUEST A LETTER OF GOOD STANDING BE SENT TO:***

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

OR

***I WILL PICK-UP ON:*** \_\_\_\_\_

**PURPOSE:**

- Tuition reimbursement
- Income tax purposes
- Insurance, i.e., health, car
- Application to Study at Another Law School (Separate Form with \$50 Fee)
- Other (describe briefly)

\_\_\_\_\_

***STUDENT SIGNATURE:*** \_\_\_\_\_ ***DATE:*** \_\_\_\_\_

I am providing my digital signature and authorization by checking this box and including my full name

Full Name:

Date:

OFFICE USE ONLY	INITIALS	DATE
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