

**UMKC SCHOOL OF LAW
VISTING STUDENT COURSE REQUEST FORM
SPRING SEMESTER 2021**

Student Name: _____

ID # _____ Cell# _____ E-Mail _____

I expect to complete my degree : _____
Month / Year

I have applied for transfer to UMKC School of Law: Yes No

Rank your courses by preference. If you do not provide any priority ranking, you will only be considered if there are open seats after other students have been placed.

| Dean Aprvd | Class# | Catalog# (Begins w/8) | Name of Course ELECTIVES ONLY | Units | Professor | Priority Rank |
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I have consulted with my home institution to verify these courses will transfer appropriately: yes _____ no _____

REQUIRED:

Student Signature _____

Comments _____
