



The University of
Montana
School of Law

Application for Admission
Summer 2009

Personal Information

Name		
(Last)	(First)	(Middle)
Address	Day Phone: ()	Evening Phone: ()
City, State, Zip code	email address:	Social Security Number
	date of birth:	

Law School you are currently attending:

Residency Your responses to the following questions and the Montana University System's Residency Policy will dictate your residency status for fee purposes.

State in which you claim legal residency:

If you claim residency in Montana, you must answer the following questions. Date domicile began in MT: ____/____/____

During the twelve months prior to the desired term of enrollment, will you have been absent from the state of Montana for more than 30 days? Yes No

As of the desired term of enrollment, will you have filed a Montana state income tax return?
 Yes No Tax year(s) _____ As a part-year resident As a full-year resident

In what state are you registered to vote? _____ Date of registration ____/____/____

From what state is your driver's license issued? _____ Date issued: ____/____/____

If you own a motor vehicle, in what state is it licensed? _____ Date of registration ____/____/____

Please send this application with the \$60 fee to:

Heidi Fanslow, Director of Admissions
The University of Montana
School of Law
32 Campus Drive
Missoula, MT 59812

I certify all of the statements made in this application for admission and the accompanying enclosures are complete and accurate. I understand that I am under a continuing obligation to supplement statements and enclosures contained in this application should the information provided become incomplete or inaccurate. I agree to abide by the rules and regulations that are now, or may be in the future, in force at the University of Montana School of Law and understand misrepresentation of application information is sufficient grounds for canceling registration or terminating admission.

Signature _____ **Date** _____