

SUBMIT FORM TO:

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Month/Year Month/Year

CLASSIFICATION: 1L 2L 3L LL.M. J.S.D. JSP Special Status Year: _____

OR

DEGREE CONFERRED: JD LL.M. J.S.D. JSP Other YEAR: _____

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I CERTIFY THAT I AM THE STUDENT, AND I HEREBY AUTHORIZE UC BERKELEY School of Law TO RELEASE THE TRANSCRIPTS AS INDICATED

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