WAYNE STATE UNIVERSITY LAW SCHOOL AUTHORIZATION FOR MASTER'S ESSAY FORM

NAME OF STUDENT:		
CTUDENT ID.		
TERM/YEAR:		
SUBJECT OF ESSAY:		
NAME OF ADVISOR	SIGNATURE OF ADVISOR	DATE
	TOR OF THE LL.M. PROGRAM	DATE
·	1 (continuing credit of audit to complete essa 2 (paper only) 3 (taken as part of a seminar)	y)
	authorize the Wayne State Law School Records Requirement for the amount of credits specified.	
STUDENT SIGNATURE		DATE

Please return this form prior to the last date of the add/drop period of the term selected to: Wayne State University Law School Records and Registration Office 471 West Palmer, Room 1223

Fax: (313) 577-9800 Phone: (313) 577-3979

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