

**WAYNE STATE UNIVERSITY LAW SCHOOL**  
**LETTER OF GOOD STANDING REQUEST FORM**

STUDENT INFORMATION: \_\_\_\_\_  
NAME  
\_\_\_\_\_  
I.D. NUMBER  
\_\_\_\_\_  
TELEPHONE NUMBER  
\_\_\_\_\_  
EMAIL

APPLYING TO: \_\_\_\_\_ VISIT \_\_\_\_\_ TRANSFER

SCHOOL YEAR/TERM: \_\_\_\_\_

PROGRAM NAME: \_\_\_\_\_

SCHOOL INFORMATION: \_\_\_\_\_  
SCHOOL NAME  
\_\_\_\_\_  
CONTACT NAME (if applicable)  
\_\_\_\_\_  
SCHOOL ADDRESS  
\_\_\_\_\_  
CITY/STATE/ZIP CODE

INCLUDE: \_\_\_\_\_ OFFICIAL TRANSCRIPT \_\_\_\_\_ LSDAS REPORT

ADDITIONAL NOTES: \_\_\_\_\_

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

Please return this form to:  
Wayne State University Law School  
Office for Student Affairs  
471 West Palmer, Room 1255  
Detroit, MI 48202  
Fax: (313) 577-6000 Phone: (313) 577-3997  
Email: lawsao@wayne.edu