



STANFORD LAW SCHOOL TRANSFER APPLICATION FEE WAIVER FORM

1. Name: _____ 2. LSAC Acct. # _____
(Please type or print clearly)

3. Address: _____ City/State/Zip _____

4. Phone: (____) _____ 5. E-mail _____ 6. Age _____

7. Marital Status: Single Married
 Divorced Separated

8. How many children do you have **and** support? _____ Their ages _____

9. Your Occupation _____

Employer _____

Annual Salary \$ _____

10. Spouse's Name _____

Occupation _____

Employer _____

Annual Salary \$ _____

11. Summer 2022 Place of Employment _____

12. Summer 2022 Salary _____

13. Total earnings before taxes from all sources for you (and spouse) during the last 12 months (*do not include financial aid*) \$ _____

14. Total cash now on hand or in bank for you (and spouse) \$ _____

15. Total present net value of all stocks, bonds, other property and financial interests of any kind held in your (and spouse's) name or held for you (and spouse) by another

\$ _____

16. Parent/Guardian's (1) Name _____

Occupation _____

Employer _____

17. Parent/Guardian's (2) Name _____
 Occupation _____
 Employer _____
18. Parents'/Guardians' Income 2022 \$ _____
 Parents'/Guardian's (1) income earned from work \$ _____
 Parents'/Guardian's (2) income earned from work \$ _____
 Interest income \$ _____
 Dividend income \$ _____
 Untaxed income and benefits \$ _____
19. Parents'/Guardians' Assets:
 Cash, savings and checking accounts \$ _____
 Home equity \$ _____
 Other real estate \$ _____
 Investments \$ _____
20. Excluding yourself, how many children do your parents support in their family? _____
 Their ages _____ Number in college _____

Certification

I certify that the above information is accurate and complete to the best of my knowledge.

Applicant's Signature _____ Date _____

Parents'/Guardians' Signature _____ Date _____

Parents'/Guardians' Signature _____ Date _____

Note: Please submit a copy of your financial aid award letter. If you received an LSAC fee waiver, include documentation of that decision.

For Law School Use Only

Approved Date _____ Notified by _____ Date _____

Denied Date _____ Reason _____ Evaluated By _____