

DOCUMENT REQUEST FORM

Submit this completed form to the Registrar's Office at lawregistrar@barry.edu

BARRY ID#:				
LAST NAME:	FIRSTNAM [†]	IE:		
BARRY EMAIL:	PERSONAL	EMAIL:		
CELL PHONE #:				
Current Student: DIVISION	N:Full-timePart-time CI	CURRENT STATUS:1L2L3L	4L	
Graduate: List Graduation	Date	_		
No Longer Enrolled: List Da	ate of Attendance			
I AM REQUESTING THE FOLLOWING DOCUMENT(S): *Document requests not claimed within 30 days of printing will be discarded and must be reordered. Please allow 2-3 business days to process your request. **Copy of Law School Applications require Photo ID and cannot be emailed.				
Letter of Academic Standing Certificate of Enrollment Copy of Law School Application**				
Class Rank(Hold for final	Class Rank (Hold for final term gradesUse last semester's class rank)			
CHOOSE METHOD OF DELIVERY:				
Pick up in person on the follo	Time			
Emailed to the following: Em	nail Address:			
	Name:			
	City:	State:Zip:		
Acknowledgement: I understand that my document request will be delivered via the method I selected, and that any holds currently on my law school record will prevent release of my document request(s). Signature: Date:				
	CONTRACTOR ONLY			
	OFFICAL USE ONLY:			
Pick-up (Photo ID Presente	ed) Emailed	Mailed Mailed		
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