



THE UNIVERSITY OF BRITISH COLUMBIA

Application for Re-admission to the Peter A. Allard School of Law

Deadline: May 31

Return to: Admissions Office
Peter A. Allard School of Law
The University of British Columbia
1822 East Mall, Vancouver, BC V6T 1Z1
Tel: (604) 822-6303 Fax: (604) 822-8108

A

PERSONAL DATA AND APPLICATION FEES

UBC Student Number

Last or Family Name

First or Given Name

Middle Name

Previous Last or Family Name

Apt #

Number/Street

City or Town

Province/State

Country

Postal/Zip Code

Area Code

Home Telephone

Area Code

Work Telephone

Date of Birth

Social Insurance Number

E-mail address

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APPLICATION FEE

☐ \$60 Cheque enclosed
(Payable to Peter A. Allard School
of Law - UBC)
(Non Refundable)

B

CATEGORY

☐ Degree

C

APPLICANT TYPE

BC Residents Only

☐ Senior Citizen

☐ Canadian Aboriginal Applicant*

*See UBC Calendar for information

D

FOR ENTRY INTO

☐ Law 1

☐ Full-Time

☐ Fall

☐ Law 2

☐ Part-Time

☐ Spring

☐ Law 3

☐ Summer

E

FACULTY/SCHOOL & PROGRAM

1. Last attendance at UBC in the program of

☐ JD

☐ JD / MBA

☐ OTHER

Session: ☐ Winter ☐ Summer Year: _____

2. Are you currently attending UBC?

☐ Yes

☐ No

If Yes, in which program: _____

3. Do you intend to complete a UBC degree?

☐ Yes

☐ No

4. Do you hold a degree?

☐ Yes

☐ No

If Yes, from: _____

5. Have you completed studies on a Letter of Permission? ☐ Yes ☐ No

If Yes, from which program: _____

F

ACADEMIC HISTORY

List all Post-secondary institutions attended or currently attending **since** leaving UBC (most recent first)

Name of Institution <small>Official transcripts must be submitted for each institution attended</small>	Province/Country	From yy/mm	To yy/mm	Degree/Diploma earned	Date yy/mm	Student Number

I accept that if, in reading and completing this application, I knowingly or carelessly provided untrue or incomplete information, (a) any offer of admission, whether accepted or not may be withdrawn by UBC; (b) I may be required to withdraw from any course in which I am enrolled; (c) I may be subject to academic discipline.

I agree that UBC may verify the information provided by contacting the relevant institution or any secondary or post-secondary institutions not listed above.

I accept that information on falsified documents is shared with the Association of Universities and Colleges of Canada.

I agree, if admitted to UBC, to comply with all rules and regulations of the University, present and future.

Signature of applicant: _____

Date: _____