



HISPANIC LAW STUDENTS ASSOCIATION
SOUTH TEXAS COLLEGE OF LAW
www.stcl.edu/students/hlsa.htm

2008 MEMBERSHIP APPLICATION

NAME: _____

Contact Information

STCL e-mail: _____

Preferred e-mail: _____

CELL PHONE NUMBER: _____

ADDRESS: _____

Birthdate: _____

Member Status

Full Time:____ **Part Time:**____ **1L**____ **2L**____ **3L**____

Expected Graduation Date: _____

Place of Employment: _____

History

Undergraduate School: _____

Major: _____

Hometown: _____

Interests

Legal Field of Interest: _____

Law School Interests/Extracurricular Activities:

