



### Letter Request Form

#### STUDENT INFORMATION

Student Name \_\_\_\_\_

Term(s)

Fall       Spring       Summer

Student ID Number

G

If you prefer to have the letter of standing and related documents sent electronically, follow this link to request an official [etranscript](#).

- Attach the completed form and all other required documents to the transcript request for processing.
- Transfer letter of standing requests must include the date and method of payment in the space provided below, and are processed upon receipt of confirmation of payment and zero balance from Accounting Services.
- Payments by paper check or e-check, will result in a 10-day hold before the form can be processed.

Payment Date: \_\_\_\_\_ Payment Method:   cash     certified funds     personal check     e-check via Stanley  

What is the reason for your request?

Other (i.e. general letter of standing, graduation certification, verification of enrollment)  
\_\_\_\_\_

Transient Letter of Standing:  Visiting another law school\*     Non Co-Sponsored Study Abroad\*\*  
Location: \_\_\_\_\_

\*Attach detailed course descriptions, grade mode, dates and hours, and plans for law school completion.

†Also attach a program brochure.

The following document(s) will be included with the letter:

- Official Transcript

Transfer Letter of Standing— \$35 fee per letter requested  
Submit completed form and payment to Accounting Services (Suite 823) for each letter requested.

The following document(s) will be included with the letter:

- Official Transcript      ▪ Current Ranking Percentiles      ▪ LSDAS Report (page 1)

Note: If multiple letters of standing are requested, attach a list to this form. Multiple forms are not required.

Issue record(s) to:

Individual/Entity Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Hold for pickup – ID Required  
(this option is not available for  
Transient/Transfer Letter of  
Standing requests)

Student Signature \_\_\_\_\_ PIN: \_\_\_\_\_ Date \_\_\_\_\_

By way of my signature, I consent and direct South Texas College of Law Houston to release my requests(s) as indicated above to the authorized recipient.

#### ADMINISTRATIVE REVIEW

Non co-sponsored study abroad programs require approval by Associate Dean & Director of Clinical Programs.

Dean Signature \_\_\_\_\_ Date \_\_\_\_\_

Accounting Services \_\_\_\_\_ Date \_\_\_\_\_

Balance: \_\_\_\_\_ Application Fee: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

Registrar Signature \_\_\_\_\_ Date \_\_\_\_\_

Processed by: \_\_\_\_\_ Date \_\_\_\_\_

Transfer LOGS Only – Copy to Associate Dean of Academic Administration

Transient Hours Toward Graduation: \_\_\_\_\_