



REQUEST FOR CLASS RANK

This form may be delivered in person to Mondale Hall, room N160, faxed to 612-625-2824, or scanned and sent from UMN email account to lawreg@umn.edu. Please allow a minimum of 2-3 business days for processing.

Requestor's Name: _____

Academic Year(s) Requested: _____ 1L _____ 2L _____ 3L

Term Requesting For: _____ Fall _____ Spring

UMN ID/Last Four SSN: _____

Phone Number: _____

Email Address: _____

Send Rank via: (check and include transmittal info)

____ Fax to:

____ Email to:

____ Mail to:

CERTIFICATION

(by student or graduate requesting rank information)

I certify that I will comply with the Law School's Academic Rules on the use of class ranks. I understand that I may receive my rank solely for the purpose of applications for post-graduate judicial clerkships and fellowships (including government and public interest fellowships), academic teaching positions, and for any position where the employer requires release of a rank after graduation.

I therefore request that I be told my class rank as of the end of the preceding academic year, or (if applicable) my final rank upon my graduation from the University of Minnesota Law School, and I agree that I will not use or disclose my rank information for any other purpose, as dictated by Academic Rule 12.5.

Signed: _____
Student Signature Date

I have listed below the names of the judges or academic institutions to which I intend to apply:

(attach additional pages if necessary)

Rev. 11/2020

To be completed by Registrar's Office Staff:

As of the _____ semester, the above-signed Requestor's cumulative grade point average of _____ resulted in a rank position of _____ out of _____ students in the Class of _____.

Request completed on: _____ Date By: _____ Staff Person