



# 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 communicate this information solely to judges to whom I am applying for clerkships, to institutions which I am applying for an academic teaching position, and/or to University of Minnesota faculty members from whom I am seeking advice concerning clerkships or teaching positions.

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)

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To be completed by Registrar's Office Staff:

As of the end 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: \_\_\_\_\_ By: \_\_\_\_\_  
Date Staff Person