

gfUY`>!HYfa `&\$%\$`Ghi Xmi5 Vf c UX
5 DD@7 5HCB': CFA

9bfc``a Ybh`ja]hYX"5 dd`]W]cb`
XYUX]bY. Bcj Ya VYf`% ž&\$-\$-

Name

E-mail

Social Security Number

Address

City

State

Zip+4

Business phone

Home phone

Emergency contact name / relationship

Emergency contact business phone / home phone

- I am a degree-seeking law student in good standing currently enrolled at:

School

- I am a degree-seeking graduate student in good standing currently enrolled at:

School

- I am an attorney or other professional.

Occupation

Application waiver:

I have read and understand the Israel Travel Warning and recognize I will be traveling to Israel at my own risk.

Signature

Date

Please include with this application:

- Letter from law or graduate school reflecting good standing
- \$150 non-refundable registration fee
(Only applicants NOT accepted into the program will be refunded the registration fee.)

Make checks payable to:

Hamline University School of Law

Send all materials and fees to:

Anne T. Johnson
Assistant Dean of Administration
Hamline University School of Law
1536 Hewitt Avenue
Saint Paul, MN 55104-1237