

## Visiting and Consortium Student Form

*This form should be used by visiting students from another ABA law school or MN law school to add courses.*

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ City, State, ZIP \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Home School \_\_\_\_\_

Are you attending a consortium school?

- ☐ Yes, University of St. Thomas  
☐ Yes, University of MN  
☐ No

If no, is your current school ABA approved?

- ☐ Yes  
☐ No

Are you in good standing at your current law school?

- ☐ Yes  
☐ No

The information requested below is optional and will assist the School of Law in meeting federal reporting requirements. Thank you for your assistance.

Are you Hispanic or Latino?

- ☐ Yes  
☐ No

Select one or more of the following races:

- ☐ American Indian or Alaska Native  
☐ Asian  
☐ Black or African American  
☐ Native Hawaiian or Other Pacific Islander  
☐ White

Gender

- ☐ Male  
☐ Female  
☐ Other/Prefer not to say

Please provide a brief rationale as to why you are requesting to take a course at Mitchell Hamline School of Law:

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I request to **ADD** the following courses.

Semester: ☐ Fall ☐ J-term ☐ Spring ☐ Summer Year\_\_\_\_\_

Course #	Section #	Credit(s)	Course Name
_____	_____	_____	_____
_____	_____	_____	_____

Student Signature: \_\_\_\_\_Date\_\_\_\_\_

If you are at a **consortium school (UMN, UST)**, please return your completed form to the Registrar’s Office [registrar@mitchellhamline.edu](mailto:registrar@mitchellhamline.edu).

If you are a **visiting student** from **another ABA law school**, please return your completed form, along with your official letter of good standing to the Admission’s Office [admissions@mitchellhamline.edu](mailto:admissions@mitchellhamline.edu).

Office Use Only

Date Received \_\_\_\_\_ Date Entered \_\_\_\_\_ Completed By \_\_\_\_\_