REGISTRAR'S OFFICE

200 McAllister Street • San Francisco, CA 94102 • office (415) 565-4613 • registrar@uclawsf.edu

Instructions: 1) Complete Section I and obtain required signature in Section II.
2) To ensure that the Specialization is listed in the commencement program, submit no later than the firstweek of classes of the semester in which you plan to graduate

Section I: Student Information

Name: _____ Student ID #_____

Anticipated Graduation Date: _____

I hereby apply for an **MSL Specialization** in the following area:

☐ Business   ☐ Employment   ☐ Immigration   ☐ Social Justice

☐ Compliance   ☐ Environmental Law ☐ International Business & Trade ☐ Start-ups & Entrepreneurship

☐ Criminal Justice ☐ Government   ☐ International Law   ☐ Tax

☐ Dispute Resolution ☐ Health Law   ☐ Litigation

☐ Self-Designed (insert approved specialization name here) _____

I certify that I have enrolled in the following courses to fulfill the above specialization:

Course Name	Course No.	Units:Total 8 or more

I hereby authorize the release of my academic file, including my transcript, to the Director of the MSL Program.

Student Signature _____ Date: _____

Section II: Certification of Director of MSL Program:

The above-named student is approved to pursue the MSL Specialization in the area shown.

Signature: _____ Date: _____

Section III: Registrar's Office

Units Completed: _____   Graduation Date: _____

Signature:_____   Date:_____