

ILLINOIS INSTITUTE OF TECHNOLOGY

565 West Adams Street Chicago, IL 60661-3691

Graduate Program in Taxation

Tel 312 906 5360 Fax 312 906 5274 E-mail admit@kentlaw.edu http://www.kentlaw.edu

APPLICATION FOR ADMISSION TO CHICAGO-KENT COLLEGE OF LAW

Graduate Program in Taxation

APPLICATION PROCEDURE: (1) Fill in all blank spaces on this form and complete the personal statement requirement. (2) File with the Office of Graduate Admissions together with the application fee of \$60. DO NOT SEND CASH. Make check or money order payable to Chicago-Kent College of Law. The application fee is not refundable and may not be applied against tuition charges. (3) Two letters of recommendation are required. These may be from law school professors or from lawyers with whom you have worked who can assess your capacity for advanced legal study in taxation. If possible, each applicant should provide one academic and one professional reference. (4) Submit an official law school transcript showing degree and date conferred. Until the fee, recommendations and official law school transcript are received, an applicant cannot be considered. All material submitted with or in support of an application becomes the property of the law school and is not returnable.

STUDY TO BEGIN:		FALL	PART-TIME	
		SPRING	FULL-TIME	
PLE	ASE PRINT OR 1	TYPE ALL ENTRIES		
API	PLICANT INFO	RMATION		
1.	Name ☐ Mr.* ☐ Ms.*	Last Name	First	Previous/Other Last Names
2.	Home address	Street and Number		City
		State	Zip Code	() Telephone
3.	Office address	Institution or Company		
		Street and Number		City
		State	Zip Code	() Telephone
				()
		E-mail/Internet Address	····	Fax
4.	Send communic	cations to	☐ Office	
5.	Social security r	number*		
6.	Biographic/Dem	ographic Information		
	State of legal re	sidence*	C	ountry of birth*
	Country of citize	enship*	If not U.S.A	, give visa status*
	Gender* □ N	∕ale □ Female	State of birth (US only)	
	Date of birth*		Do you consider Engl	ish to be your best language?* ☐ Yes ☐ No
		lian or Alaskan Native	ckground by checking one or more o Chicano/Mexican American Hispanic Description Puerto Rican American	of the following boxes*: ☐ Native Hawaiian or other Pacific Islander ☐ White/Caucasian ☐ Other:

7.	Next of kin/contact person		Relationshi	p	() ephone		
DEE	RSONAL HISTORY							
8.	Please list all states in which you have in good standing).	been admitted to pr	actice law, year o	of admission and	d current stat	tus (in good :	standing/no	
9.	Have you ever been dismissed, placed on academic probation, suspended or subject to other disciplinary action by any school college, university, law school, professional organization or state agency charged with reviewing professional conduct? Yes No If yes, give details on separate sheet.							
	☐ Yes ☐ No If yes, give details o	n separate sheet.						
10.	Have you ever been convicted of a crime (other than a minor traffic violation) or been convicted in a court-martial proceedin or is any such charge now pending against you? \square Yes \square No \square If yes, give details on separate sheet.							
	JCATION List in reverse chronological order all c	allagas universities	law ashaola a	nd other profess	ional achael	a attanded		
11.	List in reverse chronological order air c	oneges, universities	Dates of	Degree and date		Grade point	Rank	
	Name of school	Location	attendance	of graduation	Hours comp.	average	in class	
	An applicant must submit official final t	ranscripts from all la	aw schools atter	nded to the Grac	duate Progra	m in Taxatio	n office.	
12.	Law school activities:							
12.								
	Law Review							
	Moot Court							
	Other school activities							
	Prizes and honors							
REF	ERENCES							
13.	Please furnish the names, address recommendations. (These people may	•		two individuals	from whor	n you have	requeste	



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Letter of Recommendation Graduate Program in Taxation

Chicago-Kent College of Law Illinois Institute of Technology

Part I: To be Completed by the Applicant

Please complete the front of this form and give it to one of the two individuals listed as your references. Letters are required from two persons who are well-acquainted with your academic background and potential for graduate study.

Д	Applicant's Name				
	L	ast Name	First	Previous/Other	
	Social Security Number	er			
В.	Please describe the ca	apacity in which you know	the person from whom you	u are asking a recommendation.	
C.	If you have taken cour	rses from the recommende	er, please list the following:		
	School	Course Ti	tle	Year Taken	Grade
ć	accords them the right to		ations unless that right is w	amily Educational Rights and Privacy vaived. While applicants are not request absence.	
i	I have requested that this in the admission process	s recommendation form be in accordance with the Fa	completed by mily Educational Rights ar	nd Privacy Act of 1974. I hereby (ch	for use eck one):
[☐ waive access to this re	eport, which should be con	sidered confidential.		
[☐ do not waive access to	o this report.			
,	Applicant's Signature			Date	

Part II: To be Completed by the Recommender

The person whose name appears on the reverse side has applied for admission to the Graduate Program in Taxation at Chicago-Kent College of Law, Illinois Institute of Technology. The Admissions Committee would appreciate your candid appraisal of the applicant's abilities. Please include information about the length of time you have known the applicant and in what capacity (student, employee, etc.) and any specific information relative to the applicant's qualifications for success in completing an advanced degree.

I do not know the applicant well en	ough to give a reco	ammondation						
Too not know the applicant well en	ough to give a reco	ommendation. \square						
I prefer to write a separate letter of	recommendation v	which is attached.						
In your opinion, does the applicant'	your opinion, does the applicant's academic record accurately reflect his/her scholastic ability?							
☐ Yes ☐ No ☐ Do Not Know								
If your answer is "no" please briefly	explain the reason	n for your answer.						
				 	 			
What is your assessment of the ap	olicant with respec	t to the following q	ualities? Please cl	neck the appropria	ate boxes belov			
	Exceptionally good	Good, no major weaknesses	Fair	Poor	Not known			
Academic potential								
Intellectual independence								
Capacity for analytical thinking								
Ability to work with others								
Ability to express ideas orally								
Ability to express ideas in writing								
Professional promise								
Please supply any other information a separate page if necessary.	n or opinions not o	therwise expresse	d elsewhere on thi	s recommendatio	n form. Please			
a separate page ir necessary.								
Signature			Date					
Name (please print or type)			Title_					
Institution or Company								
Address								
City		State		_ Zip Code				
Telephone		E-mail						
•		 						

7. Thank you for completing this evaluation. Please return this form directly to: Chicago-Kent College of Law

Chicago-Kent College of Law Illinois Institute of Technology

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Letter of Recommendation Graduate Program in Taxation

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Α	Applicant's Name				
	Last Nam	е	First	Previous/Other	
	Social Security Number				
B.	Please describe the capacity	\prime in which you know the $\mathfrak p$	person from whom you	u are asking a recommendation.	
C.	If you have taken courses from	om the recommender, ple	ease list the following:		
	School	Course Title		Year Taken	Grade
а		v these recommendations	s unless that right is w	mily Educational Rights and Privac aived. While applicants are not req s absence.	
l ir	have requested that this recorn the admission process in acc	nmendation form be com ordance with the Family	npleted by Educational Rights an	nd Privacy Act of 1974. I hereby (ch	for use neck one):
	waive access to this report,	which should be conside	red confidential.		
	do not waive access to this r	eport.			
A	applicant's Signature			Date	

Part II: To be Completed by the Recommender

The person whose name appears on the reverse side has applied for admission to the Graduate Program in Taxation at Chicago-Kent College of Law, Illinois Institute of Technology. The Admissions Committee would appreciate your candid appraisal of the applicant's abilities. Please include information about the length of time you have known the applicant and in what capacity (student, employee, etc.) and any specific information relative to the applicant's qualifications for success in completing an advanced degree.

I do not know the applicant well en	ough to give a reco	ammondation						
Too not know the applicant well en	ough to give a reco	ommendation. \square						
I prefer to write a separate letter of	recommendation v	which is attached.						
In your opinion, does the applicant'	your opinion, does the applicant's academic record accurately reflect his/her scholastic ability?							
☐ Yes ☐ No ☐ Do Not Know								
If your answer is "no" please briefly	explain the reason	n for your answer.						
				 	 			
What is your assessment of the ap	olicant with respec	t to the following q	ualities? Please cl	neck the appropria	ate boxes belov			
	Exceptionally good	Good, no major weaknesses	Fair	Poor	Not known			
Academic potential								
Intellectual independence								
Capacity for analytical thinking								
Ability to work with others								
Ability to express ideas orally								
Ability to express ideas in writing								
Professional promise								
Please supply any other information a separate page if necessary.	n or opinions not o	therwise expresse	d elsewhere on thi	s recommendatio	n form. Please			
a separate page ir necessary.								
Signature			Date					
Name (please print or type)			Title_					
Institution or Company								
Address								
City		State		_ Zip Code				
Telephone		E-mail						
•		 						

7. Thank you for completing this evaluation. Please return this form directly to: Chicago-Kent College of Law

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Occupation, title	Dates of	Name of firm or employer	Address of firm or employer						
or work performed	employment		, ida (35 3 . ii 3. 3. ii 3. 5. ja.						
o. Describe your resp	oonsibilities in you	r current position:							
			Professional activities:						
Professional activities	S:								
Professional activities	s:								
Professional activities	s:								
Professional activities	s:								
Professional activities Publications (descript									
Publications (descript L The Test of English a	tion and/or citation	s): lage (TOEFL) is required of all appliquation at an institution which use	cants for whom English is not their native lan s English as the primary language of instru o the Office of Graduate Admissions.						
Publications (descript L The Test of English a or who did not receive the should arr	tion and/or citation s a Foreign Langu ive their legal edu ange to have offici	s): lage (TOEFL) is required of all appliquation at an institution which use	s English as the primary language of instruction of the Office of Graduate Admissions.						
Publications (descript L The Test of English a or who did not recei Applicants should arr	s a Foreign Languive their legal eduange to have officialiver of the TOEFL	s): lage (TOEFL) is required of all application at an institution which use all TOEFL score reports submitted to	s English as the primary language of instruction of the Office of Graduate Admissions.						

Name

Has any member of your family attended Chicago-Kent? 18. ☐ Yes □ No Illinois Institute of Technology? ☐ Yes ☐ No If yes, please list name, year of graduation and your relationship to this person.

PERSONAL STATEMENT

Please submit a personal statement of 1-2 pages in length, double spaced, stating why you hope to pursue an LL.M. in Taxation. Please list any professional goals you feel are relevant.

Year of Graduation

Relationship

CERTIFICATION

- I. I certify, to the best of my knowledge, that all statements submitted are correct, complete, and my own work, and that I will notify Chicago-Kent of any changes in the information contained herein arising prior to my matriculation to the law school (whether or not the Committee has already acted on my application).
 - I understand that failure to supply accurate, complete, and updated information may result in withdrawal of any offer of admission or cancellation of registration, and may be a violation of the Chicago-Kent College of Law Code of Conduct. I understand that this application and all other records gathered for my admission file are confidential and will be handled in accordance with the Family Educational Rights and Privacy Act of 1974 (Buckley Amendment).
- II. If this application for admission is approved, I agree to comply with all rules and regulations of the law school as published in the Student Handbook. I also acknowledge that I will comply with the Chicago-Kent College of Law Code of Conduct.
- III. If admitted to IIT, I hereby authorize the Director of Student Health at Illinois Institute of Technology, or any physician approved by the director, to examine me and treat me in cases of emergency when the Medical Department or the dean has been unable to get in touch with my parents, guardian or spouse. (A student who for religious reasons does not wish to sign this statement should write to the Director of Admissions. Some churches have forms which may be used by students requesting exemption from medical provisions.)

Applicant's Signature	Date

^{*} Information on sex, age, ethnic origin and citizenship status is collected for compliance reports in connection with federal regulations pursuant to the Civil Rights Act of 1964, Executive Order 11246 as amended by Executive Order 11375 and Title IX of the Education Amendments of 1972 and Part 86, 45 C.F.R. and is not mandatory. All information is confidential and will not be used to discriminate in admission to or participation in any of the educational programs or activities offered in the colleges of Illinois Institute of Technology.