Santa Clara University School of Law

Student Services Office, Charney Hall, Suite 114 500 El Camino Real, Santa Clara, CA 95053

Tel: (408) 554-4766; E-mail: LawStudentServices@scu.edu

PLEASE ALLOW AT LEAST 3 WORKING DAYS TO PROCESS. During times of heavy workload in Student Services, turn-around time may be longer. Processing of multiple requests may also take longer.

PTLS REQUEST FORM	
NAME:	Other Names Used:
CURRENT ADDRESS:	
PHONE NUMBER:	E-MAIL ADDRESS:
*SCU ID#: *(If SCU ID# is unknown, birthdate must be provide	Birthdate:
Are you currently enrolled? ☐ Yes ☐ No - Dat	es of attendance
The State Bar of California's Practical Training o to provide legal services under the supervision of	f Law Students (PTLS) program certifies law students an attorney.
Students interested in the PTLS program should:	
1) Refer to: http://www.calbar.ca.gov/Admisstudents for eligibility requirements and f	ssions/Special-Admissions/Practical-Training-of-Law-Forms.
Law School to the Student Services Office graduation date) and Admissions File Nur	nd submit this form and the <i>Declaration by Dean of</i> e. Enter your name, graduation date (or expected mber on the <i>Declaration by Dean of Law School</i> . Our <i>Note: the form cannot be completed without the</i>
	Law School will be completed and signed and the responsibility to submit all documents and required
By signing below, I certify that I have read the Re and all instructions for certification on the State E	ules Governing the Practical Training of Law Students Bar of California's website.
DELIVERY: (please check one)	
☐ Scan and e-mail to my SCU e-mail address.	
☐ Hold for Pick-Up at Student Services (you will be notified via e-mail once your request has been processed.)	
*REQUESTOR'S SIGNATURE:	DATE: