

Student Name:				N#:				Year:	20	
Law School Year Completed:	11	_	Transfer Student	:	🗌 Yes	🗌 No				
	21	_								
	31	_								
	lf If	unsure, plea	se list the total full <sup>.</sup>	-time se	emesters	completed at th	e Law Schoo	l:		
Complete the following section										
the Public Interest Law Center the position in the space prov of total earnings from the emp	ided. If t	he position v	was not acquired	throug	h PILC, t	his form must	be submitte	d witl	h confirm	ation
or total carnings from the only	ore yer end	ier by provi	unig u 112, tux rot		the year					Jyen.
Employer Name:						Job Title:				
Start Date: /		1	End Date:		/	1	F	ILC:	∏Yes	ΠNο
Total Earned (Gross): \$										
Employer Name:						Job Title:				
Start Date:/		/	End Date:		/	/	F	'ILC:	□Yes	□No
Total Earned (Gross): \$										
Please use the space provide		-				-	nation provi	ded o	n this fo	rm.
Comments:										
I certify to the best of my kno Student Financial Services of								ill info	orm the (	Office of
Signature:					_ Da	te:				

*Email: <u>nyulaw@mylrap.org</u> Fax: (331) 227 - 5287*