UNIVERSITY OF BALTIMORE / 1420 N. CHARLES ST. / BALTIMORE, MD 21201-5779

Please complete this fillable form and send to lschnitzer@ubalt.edu.

Please check one or both boxes for an application for admission in:

LL.M. IN TAXATION   CERTIFICATE IN ESTATE PLANNING PROGRAM

Term for which you are applying: ☐ Fall _____   ☐ Spring _____   ☐ Summer _____

Matriculation Status: ☐ Degree Seeking   ☐ Non-degree   Visiting

1. **Social Security Number** _____

2. **Last Name** _____ **First Name** _____ **Middle Name** _____

3. **Other name(s)** that may appear on academic records/test score reports _____

4. **Local/Present Mailing Address**:

   Number/Street _____

   City/State/Zip_____ Maryland County (*if applicable*) _____

   Home Phone _____   Work Phone_____   Cell Phone_____

   How long at this address? _____   Use present address until _____

   Months/Years   Date

5. **Permanent Mailing Address**:

   Number/Street _____

   City/State/Zip_____ Maryland County (*if applicable*) _____

   Home Phone _____   Work Phone_____   Cell Phone_____

6. **Email Address**: _____   _____

7. **Emergency Contact Person: Name/Relationship**: _____

   Address _____ City/State/Zip_____

   Telephone _____

Question 8 is optional.

8. **Date of Birth** _____   ☐ **Male** ☐ **Female**   **Country of Origin** _____

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9. **Ethnicity/Race**
   Do you consider yourself to be of Hispanic/Latino/Spanish origin? ☐Yes   ☐No

   In addition, select one or more of the following racial categories to describe yourself:
   ☐American Indian/Alaskan Native   ☐Black/African American
   ☐Caucasian/White   ☐Asian   ☐Native Hawaiian/Other Pacific Islander

Except as noted in the application instructions, responses on lines 10 - 12 do no affect the admission decision.

10. **Is English your native language**? ☐ Yes   ☐ No

    If no, have you taken the Test of English as a Foreign Language? ☐ Yes   ☐ No

    Score _____   Date (month/day/year) _____

11. **Are you a U.S. citizen**? ☐ Yes ☐ No

12. **Non-U.S. citizens only**: Country of birth _____ Citizenship: _____

    Are you currently residing in the U.S.?   ☐ Yes   ☐ No

    Date you arrived in the U.S. (month/day/year) _____

    Indicate the type of visa you currently hold:
    ☐ Immigrant Visa/Permanent Resident (Attach a copy of both sides of your Green Card.)
    ☐ Nonimmigrant F-1 Student Visa
    ☐ Other Classifications (e.g., applicant for permanent residency, visitor, spouse of student)

    Specify _____

13. **Education**: Institutions attended. Use additional sheet if necessary.

Undergraduate Schools/Location	**Dates Attended** Mo./Yr.	Mo./Yr.	**Degree**	**GPA**	**Rank**
_____	From _____	to _____	_____	_____	_____
_____	From _____	to _____	_____	_____	_____
_____	From _____	to _____	_____	_____	_____

(Please attach additional page, if necessary)

Law and other graduate schools

	Dates Attended Mo./Yr.	Mo./Yr.	Degree	GPA	Rank
_____	From _____	to _____	_____	_____	_____
_____	From _____	to _____	_____	_____	_____
_____	From _____	to _____	_____	_____	_____

(Please attach additional page, if necessary)

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14.	**Professional Experience**	**Dates Worked**	**Position Held**

Professional Experience
Name and address of firm

Dates Worked
Mo./Yr. Mo./Yr.

Position Held

From _____ to _____

From _____ to _____

From _____ to _____

(Please attach additional page, if necessary)

15. **Bar Admission**: State(s) _____ Admission date(s) _____

Are you a CPA? ☐ No   ☐ Yes: State _____ Date _____

16. **Military Service**: ☐ Active duty   ☐ Veteran   Service dates _____

17. **Scholastic honors received** (e.g., graduation honors, scholarships, honor societies):

_____

_____

_____

18. **Extracurricular/community activities and dates**, including self-support while in college or law school:

_____

_____

_____

I certify that the information recorded on this application is correct. I agree to abide by the rules, policies and regulations of the University of Baltimore if I am admitted as a student. If the conditions affecting my status change, I will notify the University of Baltimore, in writing, within fifteen (15) days of such change.

_____   _____
Typed Signature of Applicant   Date