



Paralegal Certificate Program Application – May 2018

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| Date: | | Oakland University- Office of Strategic Programs 456 Pioneer Drive 440E Pawley Hall Rochester, MI 48309-4401 Phone: (248) 370-4386 Fax: (248) 370-3090 Email: lw Wallace@oakland.edu Web: http://www.oakland.edu/pace/paralegal |
| Name: | | |
| Address: | | |
| City, State, Zip Code: | | |
| Home Phone: | | |
| Work Phone: | | |
| Email: | | |

| Previous Employment (list in reverse chronological order) | |
|---|--|
| 1) | |
| Name of Employer: | |
| Dates of Employment: | |
| Location: | |
| Phone Number: | |
| Last Job Title: | |
| 2) | |
| Name of Employer: | |
| Dates of Employment: | |
| Location: | |
| Phone Number: | |
| Last Job Title: | |

| Education (list in reverse chronological order) | |
|---|--|
| 1) | |
| Name of Institution | |
| Dates Attended: | |
| Location: | |
| Major/Degree: | |
| 2) | |
| Name of Institution | |
| Dates Attended: | |
| Location: | |

Oakland University ABA Paralegal Certificate Program Application

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| Major/Degree: | |
| | |
| 3) | |
| Name of Institution | |
| Dates Attended: | |
| Location: | |
| Major/Degree: | |

| Equality of Opportunity (this section is optional) | | | |
|---|--|------------------|--|
| Ethnic Background: | | | |
| White/Caucasian/Not Hispanic | | Asian | |
| Black/African American/Not Hispanic | | Pacific Islander | |
| American Indian/Alaskan Native | | Hispanic | |
| Other | | | |
| Gender: | | | |
| Male | | Female | |
| | | | |
| Date of Birth: | | | |

Requirements for Admission to the Paralegal Certificate Program at Oakland University:

1. Completed application
2. Sample of writing skills-one page, three paragraph autobiography.
3. Certified transcripts showing minimum of 45 semester hours of college credit.*
4. P.W.I. (Personal Writing Inventory) for those without a 4 year degree or a 4 year degree and a GPA of 2.9 or below.

*According to American Bar Association guidelines, a limited number of students may be admitted without meeting this requirement. See Detailed Program Information handout for more information.

| In the space below, please add any additional information you wish to include that is relevant to your application: | |
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| | |
| Electronic Authorization: BY TYPING MY FULL NAME IN THE SPACE PROVIDED, I VERIFY THAT I HAVE ANSWERED ALL QUESTIONS COMPLETELY AND TRUTHFULLY. I UNDERSTAND THAT WITHHOLDING INFORMATION REQUESTED, FALSIFICATION OF INFORMATION, OR MISREPRESENTATION OF ANY PORTION OF THIS APPLICATION MAY BE CAUSE FOR CANCELLATION OF ADMISSION, FINANCIAL AWARD OR APPOINTMENT. | |
| Signature | |