

CHICAGO-KENT COLLEGE OF LAW
2009 FALL INTERVIEWING PROGRAM

STUDENT REGISTRATION FORM

LAST NAME: _____

FIRST NAME: _____

MIDDLE INITIAL: __

SSN: ___ / ___ / _____

SEX: M F

DIVISION: D E

GRADUATION YEAR: 200__

MONTH: December May

BIRTHDATE: ___ / ___ / _____

CURRENT ADDRESS: _____

CITY: _____

STATE: __ __ ZIP: _____

PERMANENT ADDRESS: _____

HOME PHONE: ___ / ___ - _____ WORK PHONE: ___ / ___ - _____

COLLEGE DEGREE & MAJOR:

GRADUATE SCHOOL DEGREE & SPECIALTY:

CERTIFICATIONS:

LANGUAGE FLUENCY:

Please Indicate Employment Interests Below:

Employee Type: Practice Specialties: Target Cities (Include Suburban Areas):

___ Law Firm _____ _____

___ Corporation _____ _____

___ Government _____ _____

___ Public Interest _____ _____

___ Other: _____ _____

Summer Employment:

List your employer for Summer 2009

employer name city how position was obtained

3Ls Only:

List your employer for Summer 2008

employer name city how position was obtained