Appalachian School of Law

Letter of Standing Request

1169 Edgewater Drive Grundy, VA 24614

Phone: (276) 935-4349 or (800) 895-7411

Fax: (276) 935-8496

Please Print Legibly:			
Student Name:	Date of Request:		
Email Address:	Phone:		
Student Address:	City:	State:	Zip:
Please Read the Following and Sign Below:			
This document specifically waives your rights under as amended. When executed it authorizes and pe academic standing to the Agency/Entity listed below from your file without this authorization.	rmits the Appala	chian School of La	w to verify your
Student's Signature:	Date:		
Please list any additional information that should be placed in the should be	provided along wit	h the letter of stan	ding:
Please mail the authorized documents/information to: (Include Contact Name, Address, etc.)	The stud the Office of the	ent will pick up the Registrar.	documents from
*The Contact Name, Address, etc. above is also required for fax requests.			

Processing Time is Approximately 5 Business Days

For Office Use only:		
☐ Request complete	Date:	Initials: