

Summary Card
UBE Transfer Applicant Only

Please cut photo
To size of this square
And staple here

(DO NOT
use glue or
tape)

Please print your legal name. This name will appear on your license certificate.

Any other name by which you have been known

Address on the front _____
Of Application Street Apt. #

City State Zip

Hometown: _____
City State Zip

Law School: _____
University Name Graduation Date

SSN _____ NC Driver License Number _____

Date and Place of Birth _____

Email address: _____

Please list all undergraduate school(s) and date(s) attended.

University, City, and State	Dates Attended	
_____	From _____	To _____
_____	From _____	To _____
_____	From _____	To _____
_____	From _____	To _____
_____	From _____	To _____