

Admission to the Part-Time Paralegal Program is not a prerequisite for enrollment. However, applying for candidacy early is encouraged, no later than the third course in the program.

**Student ID#:** \_\_\_\_\_  
(if Known)

**First Name:** \_\_\_\_\_ **Middle Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **D.O.B (mm/dd/yyyy):** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Gender:**  Male  Female  Non-Binary  Decline to state

**Education:** Official transcripts with degree award date must be submitted by the third course in the program.

INSTITUTION	MAJOR	GRADUATION DATE	DEGREES EARNED

**Professional References:** Please list two professional references we may contact.

NAME	JOB TITLE	PHONE	EMAIL

**PAYMENT INFORMATION:**

American Express  MasterCard  Visa  Check (Payable to UC Regents)

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ / \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Billing Address \_\_\_\_\_

Authorizing Signature \_\_\_\_\_

In order to meet ABA requirements, we request the following information for statistical purposes only.

<input type="checkbox"/> American Indian/ Alaskan Native	<input type="checkbox"/> Asian / Asian American	<input type="checkbox"/> Black / African American	<input type="checkbox"/> Chicanx / Mexican American
<input type="checkbox"/> East Indian / Pakistani	<input type="checkbox"/> Latinx / Other Spanish American	<input type="checkbox"/> Native Hawaiian / Pacific Islander	<input type="checkbox"/> White / Caucasian
<input type="checkbox"/> Multi Ethnic	<input type="checkbox"/> Other	<input type="checkbox"/> Decline to state	

**Fax or mail this form to:**

FAX: (949) 824-2090  
MAIL: UCI Division of Continuing Education  
Records Office  
PO Box 6050  
Irvine, CA 92616-6050