

Application for the Patent Law Certificate Program

Name: _____

Graduation Year: _____

Email: _____

Division Full-Time Day
 Part-Time Day
 Part- Time Evening

Address: _____

Phone: _____

Undergraduate Educational Background: (Start with most recent institution attended.)

NAME OF INSTITUTION	DATES ATTENDED	MAJOR DEGREE
_____	_____ to _____	_____
_____	_____ to _____	_____
_____	_____ to _____	_____

Graduate/Professional Education Background: (Start with most recent institution attended.)

NAME OF INSTITUTION	DATES ATTENDED	MAJOR DEGREE
_____	_____ to _____	_____
_____	_____ to _____	_____
_____	_____ to _____	_____

Please indicate when you have taken or when you are planning to take the following courses.

Course	Semester	Year
Introduction to Intellectual Property	Fall Spring	
IP Licensing & Drafting	Fall Spring	
Patent Claim Drafting	Fall Spring	
Patent Law	Fall Spring	
Patent Litigation	Fall Spring	

Please indicate when you have or when you are planning to take the Patent Agent Examination

Exam Date: ___ / ___ / ___ **Registration Number:** _____ **Date(s) of previous examination:** ___ / ___ / ___ (if applicable) ___ / ___ / ___

(Information regarding previous examination shall be kept confidential and will not be shared with employers.)

Brief description of your career goals and interests: (Attach a separate sheet)

Student Signature: _____ **Date:** _____

Approved:

_____ **Date:** _____

Director's Signature

Please attach along with this completed form:

- | | |
|---|---|
| A resume or curriculum vitae | A copy of your law school transcript |
| A copy of your undergraduate & graduate/professional transcript | Official documentation of Patent Agent's Examination (a copy of letter stating your registration #) |

Please return this completed form and required documentation to:

Professor Dan Hunter, Director, Institute for Information Law & Policy, 40 Worth Street, Suite SE 933