

STANFORD LAW SCHOOL FALL 2025 JD APPLICATION FEE WAIVER FORM

1.	Name:	2. LSAC Account #:
	(Please type or print clearly)	
3.	Address:	City/State/Zip
4.	Phone: (
6.	Marital Status: Single Divorced	Married Separated
7.	How many children do you have <u>and</u> support?	Their ages
8.	Your Occupation	
	Employer	
	Annual Salary \$	
9. Spouse's Name		
	Occupation	
	Employer	
	Annual Salary \$	
10.	otal earnings before taxes from all sources for you (and spouse) during the last 12 months <i>(Do not clude financial aid</i>) \$	
11.	1. Total cash now on hand or in bank for you (and spouse) \$	
12.	2. Total present net value of all stocks, bonds, other property and financial interests of any kind held in your (and spouse's) name or held for you (and spouse) by another \$	

Certification:

I certify that the above information is accurate and complete to the best of my knowledge.

Applicant's Signature

<u>Note</u>: If you are a current student or graduated in 2024, you are required to submit a copy of your most recent financial aid award letter. If you received an LSAC CAS fee waiver, please include documentation of that decision.