PARALEGAL STUDIES PROGRAM
APPLICATION FOR ADMISSION
CERTIFICATE PROGRAM – PROGRAM CODE PLGL.CER

Please follow the instructions carefully. The materials shown below are necessary to process your application. Incomplete applications will not be accepted and will delay admittance into the program.

1. DEGREE, COURSE AND GRADE REQUIREMENTS

You must already have earned an A.A. degree or an A.S. degree, or higher, or equivalent, to enroll in the Certificate Program. Students who have earned an A.A.S. degree or other degrees not listed may also be admitted but may be required to take additional classes which are equivalent to classes required by COD’s A.A.S. Degree in Paralegal Studies (both PLGL and non-PLGL classes) before enrolling in the Certificate Program. In order to enroll in the program, Certificate students must have taken Introduction to Paralegal Studies (PLGL 1100) and received a grade of “C” or better, and Business Law I (BUSLW 2211), or equivalent, and have earned a minimum cumulative GPA of 2.5 in these two subjects.* Both PLGL 1100 and BUSLW 2211 must have been completed no more than five years prior to the date of this application.

*Effective Fall 2011, students who did not complete English 1101 and Speech Communication 1100 (or an equivalent English and Speech class) while in college must also complete English 1101 and Speech Communication 1100 and receive a grade of “C” or better, in order to be admitted into the program.

2. PROGRAM APPLICATION and STATEMENT OF GOALS:

Complete the attached application in full. Enter your information directly on the form from your computer and print out the completed form. Type your Statement of Goals on a separate sheet of paper and include it with your application. Applications that are incomplete, unprofessional in appearance, or that contain grammatical or spelling errors will not be considered.

3. PROFESSIONAL RESUME:

Include a current copy of a professional resume with your Program Application. The resume should reflect your education, employment history, and any other experience which demonstrates professionalism, motivation, and responsibility. For assistance in writing your resume, you may wish to contact our Career Services Center, Ext 2230, or use the following online resource:
www.cod.edu/library/services/jobscollege.htm#job-resumes.

Resumes with typographical or grammatical errors or that are otherwise unprofessional in appearance will not be accepted.

4. REFERENCES:

Three letters of reference that are dated within six months of the date of this application are required from someone who can address your potential for success in this program, based on their knowledge of your performance in a work (either paid or volunteer) or classroom setting. Provide a copy of the Reference Letter Form to each individual furnishing a reference letter. Completed Reference Letter forms and reference letters must be submitted directly from the reference providers to the Program Coordinator in sealed envelopes.

5. TRANSCRIPTS:

Include a copy of your COD transcript or degree audit showing all previous coursework completed at COD. For coursework completed at other colleges and degree verification, have the college where you earned your degree send your transcript, or other evidence of degree completion, to the Program Coordinator.

6. PERSONAL INTERVIEW:

Once you have assembled the items listed in #2, #3, and #5 above, mail your application packet to the Program Coordinator, Paralegal Studies, 425 Fawell Blvd., Glen Ellyn, IL 60137. Reference letters should be mailed separately by the reference provider. The Program Coordinator will contact you to schedule a personal interview to review your application, or you can contact the Program Coordinator to set up the required admission interview.
APPLICATION FOR ADMISSION

Admission for term beginning:  
(Add year and check term)  
☐ Spring  
☐ Summer  
☐ Fall  

Semester  
Year  

APPLICATION INFORMATION  
(Include a maiden name if you have been enrolled at COD under that name).

Name:  
Last                                    First                                 Middle                             Maiden

Mailing Address:  

City/State/Zip:  

Home Phone:  

Work Phone:  

COD Student Email (lastname@dupage.edu):  

Permanent or Other Email:  

COD Student ID #:  

EDUCATION  
Beginning with the most recent date, list all universities and colleges you attended prior to enrolling at College of DuPage, and indicate the degree that you earned.

College or University:  

Address:  

Dates enrolled:  

Major:  

Degree Earned:  

COD Paralegal Studies Program Application
Certificate

College or University: ____________________________________________

Address: ______________________________________________________

Dates enrolled: _________________________________________________

Major: _________________________________________________________

Degree Earned: ________________________________________________

PROGRAM PREREQUISITE COURSES COMPLETED AT UNDERGRADUATE INSTITUTION

<table>
<thead>
<tr>
<th>Course</th>
<th>Date Completed</th>
<th>Where Taken (Name of College or University)</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>English 1100</td>
<td></td>
<td></td>
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<tr>
<td>Speech 1100</td>
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PROGRAM PREREQUISITE COURSES COMPLETED

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<tr>
<td>Introduction to Paralegal Studies - Plgl 1100</td>
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</tr>
<tr>
<td>Business Law I - Buslw 2211</td>
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</table>

Grade Point Average for these two classes only (i.e. 3.0, 3.5, 4.0, etc.)

Please describe any academic honors or extracurricular activities in which you were involved.

STATEMENT OF GOALS:
Describe on a separate sheet of paper your reasons for wanting to enroll in the Paralegal Studies Program at the College of DuPage. You may include such information as your past work experience, your career aspirations, and other information that demonstrates your interest in pursuing the paralegal profession. The Statement of Goals must be at least 300 words in length, written in complete sentences.

COD Paralegal Studies Program Application
Certificate

Attestation: I affirm that the information provided in this application is true and correct. I understand that College of DuPage has the right to withhold admission or revoke acceptance to the program to anyone who is found to have provided false information in this application.

Signed: ___________________  Dated: ___________________

Program Note:
Completion of the program offers no guarantee of employment. Students are provided with resources and guidance for job-searching but the college cannot guarantee employment in the field. Before completing the program, students are expected to secure an internship in a law office by engaging in a self-directed search in order to participate in the required Paralegal Practicum, PLGL 260.

Please initial below to indicate your understanding of the above Program Note.

Initials: __________

Submit all information to: Sally N. Fairbank, J.D., M.S. Ed.
Program Coordinator
Paralegal Studies Program
College of DuPage, Business and Technology Division
BIC 1818
425 Fawell Blvd.
Glen Ellyn, IL 60137

______________________________________________________________

Do not write below this line.

Date Reviewed by Coordinator: ________________

Coordinator’s Signature: ___________________________  Check box if applicant approved □

Date records office advised of program admission: ________________
To the Applicant for the Paralegal Studies Program:

Please fill out the top portion of this form and give it to the individuals providing your letters of reference. *Three (3) letters are required.*

To the Individual Providing the Reference Letter:

Thank you for your willingness to write a reference letter for the applicant named above who is applying to the Paralegal Studies Program at the College of DuPage. Please fill in the information requested. For your reference letter, please use letterhead stationery with the name, address and phone number of your institution, place of employment, or other identifying information, and sign and date your letter. Your reference letter should be based on your knowledge of the applicant gained through a shared work (either paid or unpaid) or classroom experience, or a similar experience involving responsibility, professionalism, and integrity on the part of the applicant.

Name

Last Name                  First Name                  Middle Initial                  Previous or Other Surname(s)

Address

Number and Street

City                  State                  Zip

I request a Reference Letter from the individual identified below.

Applicant’s Signature                  Date

Name

Address

Number and Street

City                  State                  Zip

Email Address

In your letter, please give your personal assessment of the applicant’s ability to succeed in the paralegal program at College of DuPage. Please attach this form to your letter.

How long have you known the applicant? ________________

You may share my letter with applicant. (Check one)  Yes  No

Signature                  Date

Please mail both your reference letter and this completed form to:

College of DuPage
Sally N. Fairbank, J.D.
Paralegal Studies Program Coordinator
Business and Technology Division
Room BIC 1818
425 Fawell Blvd.
Glen Ellyn, Illinois 60137
**PARALEGAL STUDIES PROGRAM Reference Letter Form**

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(Check one)  
☐ Yes  
☐ No

Signature  
Date

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Address
Number and Street

City              State              Zip

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