

MEDICAL STATEMENT – APPENDIX B

To be completed only where an applicant believes that any illness or disability has adversely affected his or her academic, LSAT or employment performance.

Applicant Name

To be completed by physician, psychiatrist, psychologist, or other professional, and forwarded directly to the Admissions Office, Dalhousie University, Schulich School of Law, 6061 University Avenue, PO Box 15000, Halifax, Nova Scotia, B3H 4R2.

1. _____, a candidate for admission to Dalhousie University Schulich School of Law, was a patient of mine. The nature and duration of that professional relationship was as follows (briefly give details and dates):

2. Please indicate whether and how any past mental or physical illness of the applicant affected the applicant's prior academic, LSAT or employment performance:

Date

Signature

Position