

University of Dayton School of Law Class of 2015 Exit Survey Form

Please complete and return this form to the CSO.

Print Full Name: _____ Grad Date: _____

Student ID # _____ Date of Birth _____

Address after Graduation: _____ City: _____

State: _____ Zip: _____ E-mail(other than UDSL) _____ Phone: _____

Do you have a Permanent Job after Graduation? _____

If Yes, Name of Employer: _____

Address: _____ City: _____

State: _____ Zip: _____ Work E-mail: _____ Phone: _____

Type of Employer: _____ If Law Firm, Size of Firm: _____

Type of Law: _____ Your Area of Practice: _____

Did you study in the Program in Law and Technology (six or more credits in intellectual property, cyberlaw, entertainment law and/or technology law)? _____

Source of Job				
<input type="checkbox"/> Fall OCI	<input type="checkbox"/> Spring OCI	<input type="checkbox"/> Job Fair Interview	<input type="checkbox"/> Direct contact listing	<input type="checkbox"/> Resume referral service
<input type="checkbox"/> Started own practice or business	<input type="checkbox"/> Temporary placement agency or legal search consultant	<input type="checkbox"/> Returned to or continued with pre-law school employer	<input type="checkbox"/> Referral by business colleague, friend, relative, alumni, or school personnel	<input type="checkbox"/> Initiated contact by means of a targeted mailing or informational interviewing
<input type="checkbox"/> Responded to posting bulletin/jobline	<input type="checkbox"/> As a result of networking	<input type="checkbox"/> Other		

Which bar do you plan to take? _____ Are you registered for the bar and bar review courses? _____

What did you do during your first summer? _____

What did you do during your second summer? _____

Any suggestions for current students? _____

Any suggestions for improving the CSO? _____

Can the CSO or UDSL students contact you in the future? _____