INDIVIDUAL EXTERNSHIP REGISTRATION FORM

Student (print name): ___________________________ Student ID #: ________ Class Year:__________
Credit Hours (select/circle number): 2  3  4
One credit hour = 50 hours externship fieldwork 
Semester (circle and complete): Fall / Spring 20____

Have you previously registered for any externship, ad hoc, independent study, or non-law course credit? Y / N
If yes, how many such credits have you already taken? ____________

Have you previously taken a Legal Ethics Rules course? Y / N
If no, are you concurrently registered for an ethics course? Y / N

Faculty supervisor name (print): _______________________________________
Faculty supervisor signature: ____________________________________________
(Alternatively, attach an email message from faculty supervisor, stating agreement to supervise)
If you are completing a faculty-supervised research paper in conjunction with this Externship, please specify 1 or 2 credits: ______ graded or ungraded? __________
Paper Topic: _________________________________________________________

Externship Host Organization Contact Information:
Name of Organization: ________________________________________________
Address: ____________________________________________________________
Supervising Attorney’s Name: _________________________________________
Supervising Attorney’s Email and Phone #: ________________________________

Supervising Attorney’s signature: ______________________________________
(Alternatively, attach an email message from supervising attorney, offering you the externship and confirming the number of hours/credit to which you are committing in the externship placement)

Describe your educational goals for this Externship experience (substantive knowledge, practice skills, and other considerations you intend to get out of this opportunity): ____________________________
_____________________________________________________________________
_____________________________________________________________________

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_____________________________________________________________________

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Externship Administrator approval:  Dean Kim Bart
(signature) _____________________________________________________________