INDIVIDUAL EXTERNSHIP REGISTRATION FORM

Student (print name): ____________________________  Student ID #: ________  Class Year: ________

Credit Hours (select/circle number):  2  3  4  Semester (circle and complete): Fall / Spring 20____

One credit hour = 50 hours externship fieldwork

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

Have you previously registered for an externship?  Y / N
If yes, how many credits of externship have you already taken, and with which placements?
__________________________________________________________________________________________

Have you previously taken Ethics/Professional Responsibility?  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): __________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

Externship Administrator approval:  Dean Kim Bart
(signature) __________________________________________