

## EXTERNSHIP CLINIC APPLICATION

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**Semester:**  
**Graduation Year:**

**Number of Clinical Credit Hours Sought:** \_\_\_\_\_

### **Student Information**

**Name:**  
**Address:**  
**Phone:**  
**E-mail:**

### **Externship Information**

**Agency or Organization:**  
**Supervising Attorney:**  
**Address:**  
**Phone:**  
**E-mail:**

**Title:**

**Hours of work per week:**  
**Start Date:**

**Number of weeks:**

Will you receive compensation of any kind from any source, including scholarship assistance, in connection with this externship? \_\_\_\_\_

Have you previously been employed for pay at this agency or organization? \_\_\_\_\_

Do you have an offer of paid employment at this agency or organization following this externship? \_\_\_\_\_

### **Attach the following to this application:**

1. A separate statement that fully addresses:
  - a. How the externship relates to and advances your plans for your legal education.
  - b. Other experiences or interests you believe are relevant to the placement (i.e., work experience, life experience, career goals).
  - c. Your anticipated specific responsibilities at this placement.
2. A current resume.
3. A current unofficial transcript.
4. A list of all courses you anticipate taking during the semester(s) of the externship.

The information above and in the attachments is true to the best of my knowledge.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_