

Judicial Clerkship Clinic Summer 2009

Please read this carefully before applying for the Clinic. It explains the commitments you must make if you are selected to participate in the Clinic. **You must submit the original and 3 copies of your "Application Packet" to me, Pam Keller, by placing them in my mailbox in the main office by noon on Thursday, February 19, 2009. Your Application Packet must contain: (1) the application form, which you must fill out completely and which is attached here; (2) your resume; and (3) your unofficial law school transcript.** I will review these documents, as will the judges (and their full-time law clerks) participating in the program. By submitting an application for the Clinic, you are consenting to review of the information you provide and indicating your understanding of the requirements set out below and your intent to abide by them. If after submitting your application you find that you cannot participate, please notify me as soon as possible so that your application can be withdrawn. If you have questions or need additional information, please contact me (Room 420A, 864-9274, pkeller@ku.edu).

Students must enroll in the Clinic in both summer sessions. You may not drop the course without my permission and that of the judge to whom you have been assigned.

Students will receive three credit hours each summer session and be graded credit/no credit. Only students who will have completed at least two semesters of law school, but no more than two semesters and two summer sessions of law school, by the end of the spring 2009 semester are eligible for the program.

Students must work with assigned judges no less than 26 and no more than 35 hours each week of the two summer sessions (a total of 240 hours for the whole summer). You must attend an orientation session and meet individually with me at least once during the summer. You must submit a 1-2 page journal of your activities each week and you must complete an 8-10 page paper related to your experience in the program.

Students must not enroll concurrently in the Clinic and another law school clinic. You must not hold a law clerk position with a law firm, public interest organization, or governmental agency while enrolled in the Clinic. You must disclose to me and the assigned judge any potential conflicts of interest. Students also must disclose to me and the assigned judge any criminal convictions, arrests, or honor code charges that occur while enrolled in the Clinic and must disclose on the application for the Clinic any prior criminal convictions or honor code charges.

**Summer 2009
Judicial Clerkship Clinic
Application**

Name: _____

Address: _____

Telephone: _____ e-mail: _____

Number of credit hours you will have completed before the summer 2009 session. _____

Number of semesters you will have completed before the summer 2009 session. _____

summer semesters _____ fall-spring semesters _____

Expected date of graduation _____ Law School GPA _____ Class Rank _____

Name of one of your small section professors or another academic reference:

Have you ever been convicted of a crime or charged with a violation of the Law School Honor Code? _____ If yes, please explain the circumstances:

Please explain briefly your reasons for wanting to participate in the Judicial Clerkship Clinic:

We anticipate the assignments listed below.

Federal Court (Topeka, Kansas City, KS, and Wichita)

United States District Court

United States Magistrate

United States Bankruptcy Court

State Court

Douglas County District Court – general docket (Lawrence)

Johnson County District Court (Olathe)

Shawnee County District Court (Topeka)

Harvey County District Court (Newton, KS, just outside Wichita)

If you have a special interest in the U.S. Bankruptcy Court, please explain:

If you prefer a particular assignment, please explain:

If you cannot accept (or are not interested in) an assignment to any of the courts listed or if a particular assignment would cause hardship, please explain:

If you are also applying for the Fall 2009-Spring 2010 Judicial Clerkship Clinic, please indicate which you prefer: Summer Fall-Spring No preference

Signature _____ Date _____