

AGENCY INTERNSHIP APPLICATION

Student Name: _____

Application Date: _____

Address: _____

Email Address: _____

City/State/Zip: _____

Phone (Other) _____

Phone (Home): _____

Student ID No.: _____

Semester: _____

Placement Name: _____

Placement Address: _____

City/State/Zip: _____

Nature of Work to

be Performed: Civil

Criminal

Appellate

Placement Supervisor (Attorney): _____

Supervisor Phone: _____

Placement Supervisor email: _____

Time Period of Program: From: _____

To: _____

No. Hours per week: _____

No. of Units Desired: _____

Duties of Student

In Program:

Research _____

Writing (Memos/Briefs) _____

Drafting _____

Client Contact Observation Only

Contact with Opposing Attorneys Observation Only

Contact with the Public -- Explain: _____

Contact with Other Agencies Explain: _____

Legal Conferences Observation Only

Client Conferences

Negotiation Meetings

Transactional Closing

Legal Proceedings

Observation Only

Motions

Observation Only

Trials Observation Only

Depositions Observation Only

Appeals

Observation Only

Admin Hearings

Observation Only

Other Duties/Experiences (Explain): _____

Office Use Only

Placement Review - Questions for Agency Supervisor

_____ New Placement?

_____ Confirmation of Governmental Agency or Non-Profit Organization Status

_____ Confirmation that Student will not be Compensated

_____ Range of Student Duties Acceptable

_____ Commitment to Sufficient Supervision of Student

_____ Commitment to Provide Student Evaluations (Periodic; Final/Written)

_____ Commitment to Provide Confirmation of Student Work Hours

Completion of Course Requirements

_____ Requirements Contract

_____ Agency Visit

_____ Journal

_____ Supervisor Eval/Hr. Confirm

_____ Work Product Folder

_____ # of Units Approved

_____ Writing Assignment #1

_____ Writing Assignment #2

_____ Final Paper

_____ Grade