UNIVERSITY OF LA VERNE

COLLEGE OF LAW

EXTERNSHIP APPLICATION

In order to register for an externship for academic credit, please follow these steps:

Read the Directive, apply for an externship, you have received an offer from a preapproved law office and accepted the offer, complete this form. Submit this form to Professor Diane Uchimiya via e-mail at duchimiya@laverne.edu for approval. Once approved, notify the Registrar and register for the course.

Student's Name:	Telephone:
Email:	
Full or Part-time student?	
Number of semesters you have	completed:
Anticipated date of graduation:	
Number of externship units req (** each unit requires 52 hours	uesting this semester:of work at your placement)
Number of externship credits yo	ou earned in previous semesters:
	ave completed, please list the organization's name, ell as the semester and year of the externship:
•	of interest arising from past interaction with a firms, other organizations, or any other matter.

Externship Placement Information
Name of Organization:
Supervising Attorney: :
Title of Supervising Attorney: :
E-mail address: :
Phone Number:
Office Address:
Anticipated duties:

Start date: Completion date:
Prior externship units completed:
Why do you want to do this externship?
I have read the Directive and agree to follow its terms.
Student's signature: Date:
You may not begin your externship until you have received approval from Professor Uchimiya.
Approved by Professor Diane Uchimiya:
Date: