LL.M. Externship Request Form
MSU College of Law • Office of Student Engagement • 648 N. Shaw Lane, Rm. 308, East Lansing, MI 48824
Phone Number: 517-432-6835 • Fax Number: 517-432-6855 • Email: oselaw@law.msu.edu

Print First & Last Name (Surname): ___________________________________________ PID: ______________________

MSU Email Address: __________________________@msu.edu    Phone Number: _______________________________

Expected Graduation Date: _________________________________________                            Level:  ☐ LL.M.

Externship Semester:   Fall 20_____   Spring 20_____   Summer 20_____

Is this a 3-credit externship?  ☐ Yes  ☐ No

Are you planning to take a bar exam?  ☐ Yes  ☐ No

Externship Title: _______________________________________     Location: ___________________________________

Keeping this in mind, please provide a short description detailing how the externship will complement the academic goals of your degree:
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

An externship site must provide students with substantial lawyering experience primarily to benefit the student. Students must perform legal tasks such as research, analysis, investigation, counseling, or legal writing. Students may not receive academic credit for positions that consist primarily of clerical activities. Non-legal clerical or other tasks should be kept to a minimum.

Keeping this in mind, please provide a short description detailing how the externship will complement the academic goals of your degree:
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

The Assistant Dean for Student and Academic Affairs must sign this form before the Externship Director. Note: this form does not replace the externship application. As such, it is important to complete this request form well before the externship application deadline in order to account for processing time.

This form may be submitted via mail, fax, email, and in person to the address listed at the top of this form. I understand that the Office of Student Engagement requires at least 24-48 hours to process all requests.

Student Signature: _______________________________________________________ Date: ______________________

Assistant Dean for Student and Academic Affairs: __________________________  Date: ______________________

Externship Director Signature: ___________________________________________ Date: ______________________

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