

**Pepperdine Law
EMS Externship Registration**

1. Registrants must have met with their Academic Advisor for externship approval.
2. The externship must be secured.
3. Registrants must be in good academic standing and have a cumulative GPA of 2.3.

Name: _____ CWID: _____
Address: _____
City: _____ State: _____ Zip: _____
Best Phone: _____ Email: _____

Semester: Fall _____ Spring _____ Year _____ **Paid/Unpaid** (circle one) **Units:** _____

Note: Each unit of externship credit requires 52.2 hours of work in the field. The externship requirement for EMS LLM students is a minimum of 2 units, and you may choose to take 2 units in a single semester or 1 unit for two semesters.

Externship Information

Agency: _____
Department/Division/Judge: _____
Address: _____
City: _____ State: _____ Zip: _____
Supervisor: _____ Title: _____
Phone: _____ Email: _____ Fax: _____

Start Date: _____ End Date: _____

Anticipated Work Days: M _____ T _____ W _____ Th _____ Fri _____

Hours: _____

Student Signature: _____ Date: _____

Your signature indicates you wish to be officially enrolled and that you have read and agreed to the financial policies as stated in the School of Law catalog.

Office Use Only

GPA: _____ Course: _____
Offer Received: _____ Units: _____
Workshop: _____
Approved: _____ Date: _____

**PEPPERDINE UNIVERSITY SCHOOL OF LAW
CONFIRMATION OF EXTERNSHIP OFFER**

To be completed by employer

Please complete this form and mail or email it back to Pepperdine Law, Graduate Law Programs (address below). Be sure to include all of the following information:

I am authorized to offer an externship position to: _____

For the semester beginning _____

Externship with will begin on _____ and end on _____, for _____ hours per week.

I understand the above student will earn academic credit for legal work performed under the supervision of a licensed attorney, and these field supervisors are required to complete a mid-term and final evaluation of the student.

Name of supervising attorney or judge: _____

Title: _____

Agency/Organization: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Signature of Supervisor

Date

Email or mail to:

Graduatelaw@pepperdine.edu

Pepperdine University School of Law
Graduate Law Programs
24255 Pacific Coast Highway
Room 202
Malibu, CA 90263
Phone: (310) 506-7449

**Pepperdine Law EMS Externship Program
Student Performance Agreement**

As a Pepperdine Law extern, I agree to:

1. Be familiar with, and comply with, all Pepperdine Law policies and procedures as set forth in the document provided to me entitled *Pepperdine Law EMS LLM Externship Handbook* as well as with any other requirements or policies contained in the Law School Student Handbook.
2. Be fully aware of my professional and ethical obligations at all times in my workplace. I agree to adhere to the Confidentiality Policy, as well as to familiarize myself with, and adhere to, the confidentiality policy of my workplace. The Confidentiality Policy is as follows:

“Externs shall not reveal information designated as confidential by their supervisor. Externs shall not reveal information relating to the representation of a client, disclose the identity of a client or reveal information leading to the disclosure or identify of a case or client without the express advance authorization of their supervisor. Externs shall redact all written work submitted to preserve confidentiality.”

3. I agree that my externship will begin _____ and end _____. I will not alter these dates without obtaining the express consent of my supervisor and my Academic Advisor. I agree to work _____ hours per week. I agree not to discontinue my externship for any reason without first obtaining the permission of my Academic Advisor.
4. I understand that it is solely my responsibility to submit all documents on time that are required to complete this externship course. It is solely my responsibility to verify with my Academic Advisor that I have completed all course requirements on or before the last due date for the semester,
5. I understand that I will not receive credit for my externship unless, and until, this document is signed by me and my supervisor, and I comply with the other requirements of the EMS Externship Program.

I have read this *Student Performance Agreement* and understand and agree to comply with it. I understand that my signature reflects my agreement with the terms herein. I also acknowledge receipt of and understand and agree to comply with the document entitled *Pepperdine Law EMS LLM Externship Handbook*.

Student Signature

Date

Printed Name