

THURGOOD MARSHALL SCHOOL OF LAW



EXTERNSHIP PROGRAM

EXTERNSHIP APPLICATION PACKET

Please attach the following documents to this application:

1. Current Resume', One Page;
2. Current Writing Sample, (i.e. Appellate Litigation Brief);
3. One Page Cover Letter;
4. Current Transcript- Official Copy or Copy from MyTSUWEB;
5. Completed Application;
6. Passport Photograph; and
7. Copy of Driver's License.

ALL DOCUMENTS LISTED ABOVE MUST BE SUBMITTED PRIOR TO YOUR INTERVIEW WITH THE EXTERNSHIP COORDINATOR.

For clarifications or questions, please contact Professor Stephanie Smith Ledesma, Room 236 F;
or at 713-313-1105; or at stephanie@ledesma-law.com

THURGOOD MARSHALL SCHOOL OF LAW

EXTERNSHIP APPLICATION

- ALL DOCUMENTS LISTED ON THE PREVIOUS PAGE MUST ACCOMPANY THIS APPLICATION TO BE DEEMED COMPLETE.
- NO INCOMPLETE APPLICATIONS WILL BE CONSIDERED.

APPLICANT INFORMATION

Date of Application: _____

Indicate the Semester for your desired externship: Fall _____ Spring _____ Summer _____

Full Name: _____

Local Address: _____

Telephone: _____ Email Address: _____

Alternate Telephone: _____ Email Address: _____

Date of Birth: _____

Social Security Number: _____

Driver's License Number: _____ State: _____

Law Clinic Experience: ____ Yes ____ No ____ Year Completed: _____

Previous Internship Experience: ____ Yes ____ No ____ Year Completed: _____ Placement: _____

Mock Trial Experience: ____ Yes ____ No ____ Year Completed: _____ Final Standing: _____

Mock Trial Experience: ____ Yes ____ No ____ Year Completed: _____ Final Standing: _____

Moot Court Experience: ____ Yes ____ No ____ Year Completed: _____ Final Standing: _____

Moot Court Experience: ____ Yes ____ No ____ Year Completed: _____ Final Standing: _____

Law Journal/Review ____ Yes ____ No

EDUCATION

Graduating Class of : _____ Current GPA: _____ Class Ranking: _____

EXTERNSHIP PLACEMENT

1. Externship of Choice, please number your preference 1st, 2nd, and 3rd:

Civil _____

Criminal _____

Judicial _____

2. What is your first preference for placement?

a. Name of Contact at desired placement: _____

b. Professional Title of Contact: _____

c. State Bar Number of Contact, if applicable: _____

d. Phone Number of Contact: _____

e. Email Address of Contact: _____

f. Is this a paid externship? ___Yes ___No

g. Do you expect to apply to a post-graduation position at this placement? ___Yes ___No

h. Are you related to anyone at this placement? ___Yes ___No

i. Have you worked at this placement before in any capacity, if so please provide dates and assigned duties: _____

3. What is your second preference for placement?

j. Name of Contact at desired placement: _____

k. Professional Title of Contact: _____

l. State Bar Number of Contact, if applicable: _____

m. Phone Number of Contact: _____

n. Email Address of Contact: _____

o. Is this a paid externship? ___Yes ___No

p. Do you expect to apply to a post-graduation position at this placement? ___Yes ___No

q. Are you related to anyone at this placement? ___Yes ___No

r. Have you worked at this placement before in any capacity, if so please provide dates and assigned duties:

RELATED INFORMATION

1. Classes that you have taken that are related to your externship choice:

a. _____

b. _____

c. _____

d. _____

WORK EXPERIENCE

1. Will you be employed during the semester in which you are applying for externship placement? If so, where will you work and how many hours will you work?

2. What is your prior work experience? Please include the name of your employer and the dates of employment.

3. Indicate areas in which you have unique training? (i.e. foreign languages and computer skills)

EXTRACURRICULAR ACTIVITIES

1. What law school organizations are you a member; please include the name of the organization and the year of membership?

2. What positions of leadership have you held in the law school; please include the title of the positions and the year of responsibility?

3. What community organizations are you a member; please include the name of the organization and the year(s) of involvement?

4. What positions of leadership have you held in the community; please include the title of the position and the year of responsibility?

REFERENCES

List two faculty members as a reference, including their contact information.

EMERGENCY CONTACT INFORMATION

Name of emergency contact: _____

Address for emergency contact: _____

Telephone Number(s) for emergency contact: _____

Relationship of emergency contact: _____