SUMMER LAWYERING PRACTICE EXTERNSHIP PRE-REGISTRATION FORM (2011)
Return this form and a copy of your résumé to Katie Herr, Clinical Affairs Operations Manager (Rm 107, Phone: 314-935-5942, kmherr@wulaw.wustl.edu)

(NOTE: Completing this form does not guarantee placement; placement is at the discretion of the instructor.)

Name: ______________________________ ID#: ______________ Graduation: ____________ (Month/Year)

Address: ________________________________________________________________________
(Street / City / State / Zip)

Phone: __________________________________________

For how many credits are you registering? ________ (3-6 credits)

Have you already obtained a placement? ________

If yes, please specify placement and city: ________________________________

If not, please rank your preferences below, ‘1’ bring your first choice.

______ BJC HealthCare Legal Services (St. Louis)

______ Land of Lincoln Legal Assistance (Alton, Illinois)

______ Equal Employment Opportunity Commission: Legal (St. Louis)

______ Equal Employment Opportunity Commission: Federal Sector Adjudication (St. Louis)

______ Federal Public Defender, Eastern District of Missouri (St. Louis)

______ Federal Public Defender, Southern District of IL (E St. Louis)

______ Missouri Attorney General’s Office (St. Louis)

______ Department of Natural Resources (Jefferson City)

______ St. Louis Family Court

Please attach a copy of your résumé to this form.