



**INTERNSHIP PROGRAM
STUDENT REPORT**

Name: _____ Date: _____

Graduation Semester/Year: _____

Place of Internship: _____

Supervising Attorney or Judge: _____

My internship was at a ___ Court ___ Government Agency ___ Law Firm ___ Legal Services Agency.

_____ attorneys work in the office.

The area(s) of law practice in this office include:

The area(s) of law I worked in included:

My work in this internship involved the following legal tasks:

	Considerable	Some	None
Legal research			
Drafting court documents			
Drafting other documents (e.g. contracts, wills, trusts, etc.)			
Client contact			
Contact with opposing attorneys			
Contact with government agencies and attorneys			
Court appearances			
Other:			

What factors influenced your decision to do this internship (rank 1-4, with 1 being most important and 4 being least important):

Course Credit

Learning Opportunity

Contact/Reference for Potential Future Employment

Other: _____

What was your overall evaluation of the judge/attorney who supervised you?

	Excellent	Very Good	Average	Poor
Gave you constructive feedback				
Was available for your questions				
Conducts their work with integrity				
Sets good standards for work product				
Demonstrates professionalism				

How much responsibility did you have as an intern?

Substantial Considerable Some Not Much

How has this internship contributed to your professional development?

Were you paid for your work? Yes No

Did you become a Certified Law Student Yes No

Would you recommend this internship to other students? Yes No

Why or why not?

Do you have any feedback on the school's Internship Program?

**INTERNSHIP PROGRAM
TIME SHEET**

	TOTAL	

Student Name:

Supervising Attorney or Judge:

Place of Internship:

VERIFICATION OF TIME SHEET

I verify that the above-named student worked a total of _____ hours under my supervision, on the dates listed above, for their internship credit.

Supervising Attorney Signature
(Supervisor may sign electronically or in hard copy)

State Bar No.

Date



**INTERNSHIP PROGRAM
SUPERVISOR EVALUATION**

Supervising Judge or Attorney: _____

Firm/Agency: _____

Area of Law: _____

Student Intern Name: _____

In order for the law school to evaluate student performance in the internship program, we ask the supervising judge or attorney to complete this form.

	Excellent	Very Good	Average	Poor	Unknown or N/A
Knowledge of the law					
Research skills					
Writing skills					
Communication skills					
Quality of work product					
Professionalism					
Client relations					
Staff relations					
Taking ownership					
Working autonomously					
Meeting deadlines					
Overall ability					

COMMENTS:

Supervising Attorney Signature
(Supervisor may sign electronically or in hard copy)

State Bar No.

Date