

**LLM INTERNSHIP CONTRACT**  
International Legal Studies Program

Term: Fall \_\_\_\_ Spring \_\_\_\_ Summer \_\_\_\_ Year \_\_\_\_ Projected Graduation: \_\_\_\_\_  
(Month/Year)

Number of Credits: \_\_\_\_\_ Internship Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
(Each credit = 70 hours of work)

Full Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
(Please Print Clearly)

**NOTE:** LL.M. students are allowed a **maximum of 6 credit hours** of course work in the form of internship/independent study as well as approved courses taken outside American University.

Supervisor: \_\_\_\_\_ Organization/Firm: \_\_\_\_\_  
(Please Print Name)

Supervisor's Signature: \_\_\_\_\_  
(Please complete the backside of this document)

LL.M. Advisor Signature: \_\_\_\_\_

I understand and accept that this Independent Study is undertaken with my full knowledge that the number of credit hours taken in an Internship/Independent Study coursework or approved courses taken outside American University, and which will be counted toward my LL.M. degree, may not exceed a total of six credits. I also understand that I must comply with the academic regulations and honor code set forth in the Washington College of Law catalogue for the semester in which I began enrollment.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Faculty Action**

This section is to be completed by the faculty advisor at the end of the project.

Credits Earned: \_\_\_\_\_ Internship Completed:  Pass  Fail

Faculty Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**THIS SECTION IS TO BE COMPLETED BY THE INERNSHIP SUPERVISOR**

**Mailing Address:**

**Telephone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Please describe the intern's primary responsibilities below:**

**Additional Comments/Notes:**