



FLORIDA INTERNATIONAL UNIVERSITY

Office of Externships and Pro Bono Program

PRO BONO LEGAL & EDUCATIONAL SERVICE CONFIRMATION & MUTUAL UNDERSTANDING AGREEMENT

This agreement constitutes confirmation and a mutual understanding for placing this student in an uncompensated work assignment for pro bono service. The Student and the Supervisor shall read and complete this form. Return this form, the Student Time Log and the Student Evaluation of Placement; otherwise hours cannot be accepted.

Name of Student _____
Class _____ Division _____ Panther ID _____

Name of Organization _____
Address _____
Email _____ Telephone _____

Attorney Supervisor _____ Title _____

Briefly describe the duties to be performed

Will any training be required? ___Yes ___No Total number of training hours _____
What type of training will you provide? _____

Date placement begins _____ Date placement ends _____

I have read the Pro Bono Program Brochure and this Pro Bono Legal and Educational Service Confirmation and Mutual Understanding Agreement and agree to abide by the terms and conditions of the Pro Bono Program. I understand that I am representing FIU College of Law and will conduct myself in a professional manner at all times.

Supervisor Name Supervisor Signature Date

Student Name Panther ID# Student Signature Date

Return all forms to:
Zoraya Ledesma at RDB 1010 (The Clinic)
or via email at ledesmaz@fiu.edu