



The Wolverine Bar Association 2017 Summer Clerkship Program

NAME: _____ DATE: _____

ADDRESS: _____

TELEPHONE # _____ EMAIL: _____

LAW SCHOOL: _____ LAW SCHOOL GPA (if known): _____

UNDERGRADUATE INSTITUTION: _____

UNDERGRADUATE GPA _____

NAME OF TWO RECOMMENDERS:

Recommender #1

Relationship to Applicant

Recommender #2

Relationship to Applicant

Are you a member of the Wolverine Bar Association?

Yes No (while membership is encouraged, it is not a requirement to participate in SCP)

PLEASE CONFIRM THE FOLLOWING (check the corresponding boxes where applicable):

- You are in good standing with your law school.
- You have ties to Southeastern Michigan and a desire to practice law in the metropolitan Detroit area after completing law school.
- You will have completed a legal writing course *before* the clerkship begins.
- By the time the clerkship starts, you will have completed *no more than* 15 courses toward graduation.
- You have not previously participated in the Summer Clerkship Program.
- Provide Month/Year of Expected Graduation: _____

Would you also like to be considered for participation in the Judicial Externship Program (JEP)?

Yes No (If so, you must also complete the JEP Application)

APPLICATION CHECKLIST (All requirements must be met to be considered for the Program. Submit **ALL** the required documents as **ONE single PDF**):

- Cover Letter
- Current Resume
- Official or Unofficial Law School Transcript
- Writing Sample (Not to Exceed 5 Pages)
- Two (2) Letters of Recommendation
- One Page Personal Statement

I understand that SCP retains the right to rescind an offer to participate in the program. If selected for the program, SCP may terminate my participation in the program if I fail to comply with the program's requirements.

I understand that, if chosen to participate in SCP, the selection committee, solely, decides my firm placement. My firm placement is non-negotiable.

By electronically signing this Application and Release, I agree that representatives from the Summer Clerkship Program can contact my law school professors and administrators for evaluations, grades, and recommendations.

Signature: _____

Date: _____

RETURN TO: WBAscp.jep@gmail.com