UNIVERSITY OF MINNESOTA
LAW SCHOOL

INDEPENDENT FIELD PLACEMENT (IFP) ENROLLMENT FORM

Under Law School Academic Rule 10.5(b), students may enroll for up to three field placement credits per semester under the supervision of a qualified field supervisor and a Law School faculty member. To register, students must complete this IFP Form, obtain approval from the field and faculty supervisors (signatures on form or written confirmation of approval after reviewing form), and ***submit all materials to the faculty assistant in room N216 for review and approval by the Associate Dean for Academic Affairs.*** *If approved, the student will be enrolled.*

Student Information

Name: _____ Student ID: _____ 2L or 3L: _____
Phone: _____ Email address: _____ Expected Grad Sem/Yr: _____

Faculty Supervisor (name and email): _____

Placement Supervisor Information

Name: _____ Firm or Organization: _____
Phone: _____ Email address: _____ Title/Position: _____
Address: _____ City: _____ State: _____ Zip: _____

STUDENT CERTIFICATION

I have read Academic Rule 10.5 and the IFP Instruction Memorandum and in accordance therewith I certify that:

1. This IFP Enrollment Form has been reviewed and approved in its entirety by both the faculty and placement supervisor.
2. The number of anticipated hours of field placement work is _____ hours (50 hours required per credit).
3. The number of credits sought is _____ credits (no more than 3). The applicable tuition rate will be charged.
4. I understand that I may enroll in no more than one IFP in any term and that the total number of field placement credits I may earn is governed by Rule 3.1(c)).
5. The semester/term of enrollment is: _____ (Summer, Fall, Spring) _____ (Year).
6. The IFP completion deadline, including field hours and documentation, is the last day of exam period for the term, unless an extension is granted under Rule 12.4.
7. I understand that the IFP will be evaluated on a Satisfactory/No Credit basis unless noted otherwise in the appropriate section on the reverse side, initialed by the faculty supervisor.
8. I understand that I may not receive compensation for my field placement work and that the placement host may not be compensated for work I perform in the placement. I am permitted to receive reimbursement for reasonable expenses associated with the placement; if I receive reimbursement, I will keep records of the associated expenses.

Signed: _____ _____
Student signature *Date*

FACULTY AND FIELD PLACEMENT SUPERVISOR APPROVAL

(separate written confirmation of review and approval is acceptable)

We have reviewed and approved this IFP Enrollment Form in its entirety and recommend that the IFP be approved.

Signed: _____ Date: _____
Faculty Supervisor

Signed: _____ Date: _____
Field Placement Supervisor

To be completed by Registrar's Office Staff:
Date Received: _____ Date Processed: _____ Completed By: _____

Associate Dean of Academic Affairs _____ Date _____

Independent Field Placement Description, Educational Objectives and Methods, and Evaluation

Pursuant to Academic Rule 10.5(b), you must provide the following information

Description of the Field Placement (including work setting(s), types of law-related activities, and opportunities for observing relevant activities):

Specific Educational Objectives (with respect to substantive law, legal skills, and professional values):

Arrangements for Feedback and Instruction in the Placement (and how that will help you attain stated educational objectives):

Basis for Faculty Supervisor's evaluation of Field Placement work (check all that apply; note minimum requirements)

- ☐ Timesheets reflecting dates and hours of field placement activities completed (REQUIRED)
- ☐ Written student reflections via contemporaneous journals and/or response papers (REQUIRED: CIRCLE ONE OR BOTH)
- ☐ Written evaluation by field placement supervisor (REQUIRED)
- ☐ Written work completed by student in course of field placement exercise (redacted if necessary to preserve confidentiality)
- ☐ Regular communication between student and faculty supervisor (in person, by phone, or electronically)
- ☐ Other: _____

_____

Grading Basis, if other than Satisfactory/No Credit (initialed by Faculty Supervisor): _____