

## Washburn University School of Law Externship Program

# EXTERNSHIP COMPLETION CERTIFICATE

Student Extern: \_\_\_\_\_

Type of Externship: D Externship I D Externship II

Number of Enrolled Externship Credit Hours:

Field Placement Supervisor:

Externship Faculty: Externship Director Shawn S. Leisinger, (785) 670-2464

#### **Field Placement Supervisor's Certification**

As the Field Placement Supervisor for the listed Student Extern, I certify that the student performed, under my supervision, a minimum of 50 hours of unpaid work for each enrolled hour of externship credit. (On an attached page, please provide any comments or suggestions you may have concerning the externship experience from your perspective.)

Signature & Date: \_\_\_\_\_

#### **Student's Certification**

I certify that I performed a minimum of 50 hours of unpaid work for each enrolled hour of externship credit.

Signature & Date: \_\_\_\_\_

### **Faculty Member's Certification**

I certify that this student has completed all of the requirements to receive credit for his or her externship experience.

Signature & Date: \_\_\_\_\_