LIBERTY UNIVERSITY SCHOOL OF LAW WORK REQUEST FORM and CERTIFICATE OF COMPLIANCE

The School of Law Director of Student Affairs must receive this signed form from every student for *each semester* of expected employment prior to the student beginning any work. The School of Law Dean's signature is required for all 1L student employment and any 2L or 3L student employment in excess of 20 hours per week. If the dean's permission is required, the dean will consider the totality of the circumstances in deciding employment requests.

EMPLOYMENT AND ACADEMIC WORKLOAD POLICY

The rigors of legal education, particularly for first-year students, are such that any employment is discouraged. If necessity requires employment, first-year students must receive prior written approval from the dean to be employed.

After the first year of law school, a student may not be employed more than 20 hours per week in any week in which the student is enrolled in more than 12 class hours. Second-year or third-year law students working 20 hours or less must submit a signed certificate each semester they are employed stating that they have read the employment policy and agree to comply with it. If financial circumstances require a 2L or 3L student to be employed in excess of 20 hours, the student must receive prior written approval from the dean to be employed.

By signing below, the student acknowledges that the student has read the Employment policy and agrees to comply with it.

STUDENT INFORMATION

Student Name	LUID				
Student Signature					
Date Submitted		Check One:	1L	2L	3L

REQUEST FOR DEAN'S APPROVAL

Employment Hours per Week (Check One and include expected number of hours):

____ Greater than 20 hours _____

20 hours or less

1L Student: Undergraduate GPA

2L Student: Law School GPA

3L Student: Law School GPA

<u>1L Only:</u> LSAT: _____ Undergraduate Institution:

PROPOSED EMPLOYMENT INFORMATION

Employment is requested for the Fall of 20 or Sprin	ng of 20
Proposed employment title	
Proposed employment description	
Proposed employment work schedule	
Reason for employment	
DECISION	
Decision	
Director of Student Affairs Signature	Date
Dean's Signature (if applicable)	Date
Dean's Comments	
	Internal Office Use Only
	nt
Date Forwarded to Dean (if applicable)	
Date Student Notified	