

CLINIC CHECKLIST/OVERRIDE FORM

The clinic checklist/override form is to be submitted by the student to the Clinic Instructor for approval. The Clinic Instructor will send the completed checklist to lawreg@siu.edu for review and processing.

This form is to be filled out and signed electronically by all parties. Instructions on how to do this can be found at <https://law.siu.edu/programs/student-services/registrar.php>.

Clinic prerequisite: Students must be Illinois 711 license eligible (earned credits that represent at least one-half [45] of the credits required for graduation and be in good standing at the time of enrollment and remain in good standing at the time of the course).

To be completed by student:

NAME: _____ DAWGTAG: _____ EMAIL: _____

COMPLETED CREDIT HOURS (passed/earned hours): _____ @ the end of _____
(Do not include courses/credit hours that are in-progress) (Semester and Year)

GOOD ACADEMIC STANDING: YES NO (CUMULATIVE GPA: _____ @ the end of _____)
(Semester and Year)

COURSE REQUESTED: LAW 673 Civil Practice Clinic SECTION: _____

LAW 677 Juvenile Justice Clinic SECTION: _____

SEMESTER REQUESTED: SUMMER FALL SPRING YEAR: _____

NUMBER OF CREDIT HOURS PREVIOUSLY COMPLETED AND/OR CURRENTLY ENROLLED: LAW 673(CPC)
LAW 677 (JJC)

Note: No more than 3 credit hours of any one Legal Clinic per Fall/Spring semester (2 credit hours per Summer semester). No more than one Legal Clinic per semester without permission from all involved Faculty Supervisors, No more than 6 credit hours of any one Legal Clinic over multiple semesters without permission from the Clinic Director.

OVERRIDE(S) REQUESTED: SPECIALAPP (for Instructor Approval) REPEAT

DATE: _____ Student Signature: _____

To be completed by Clinic Instructor: Approve Deny

Comments:

DATE: _____ Clinic Instructor Signature: _____