



151 E. GRIFFITH STREET | JACKSON, MS 39201

**PRO BONO RECOGNITION PROGRAM
Program Participation Form**

*Submit completed form to Professor Meta Copeland.
Do Not begin volunteering for pro bono hours until your request has been approved by Professor Copeland.*

Student

Today's Date: _____

Student Name: _____ Anticipated Graduation Date: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____

Email Address: _____

Sponsoring Organization

Supervising Attorney/Contact Person: _____

Title: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Fax Number: _____

Email Address: _____

1. Type of Organization (Please indicate all that apply)

Government
Legal Services Corp

Non-Profit

Other: _____

2. Briefly describe sponsoring organization (Attach a brochure or give website address, if available):

3. Briefly describe how you will be involved in pro bono legal services at this organization:

4. Will you be employed by the sponsoring organization during the period of the proposed pro bono volunteer hours?

Yes No

5. Are there any law school courses or training prerequisites required for the proposed placement?

Yes No

If yes, please list:

I agree to perform all tasks in a professionally responsible manner. _____

Student's Signature

I confirm that the above student will receive professional supervision. I acknowledge that the student has not been admitted to the Bar, and cannot represent or provide legal advice to the organization, program or its clients, and that the organization will not rely on the student's work product in taking any action or forbearing from any actions that may subject the organization, program or its clients to legal liability. I confirm that the student will not receive financial compensation for work performed during placement. I further agree that, if requested by MC Law School, I will complete an evaluation of the student's performance at the conclusion of the placement.

Supervisor's Signature

Date

Please return completed forms to:

*Professor Meta Copeland, Director of Experiential Learning, mcopelan@mc.edu
Mississippi College School of Law, 151 East Griffith Street, Jackson, MS 39201*