**IMPORTANT: To be considered for enrollment in the Community Health Law Partnership Clinic, you must email this form to Prof. Cade by 5pm on March 21 at cadej@uga.edu**

Application Form 2018

**Community Health Law Partnership Clinic**

**(Community HeLP)**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Telephone: (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Telephone:(\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Telephone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please type answers to the following questions.

**1.** **Why would you like to participate in the Community HeLP clinic?**

**2.** **What experience have you had that may make your participation in Community HeLP valuable to clients or to other students in the clinic?**  (You might describe prior experience working with people from other cultures, socio-economic backgrounds, or countries; and/or prior experience with immigration law, health law, employment law, housing law, benefits law, family law, or other public law; and/or prior experience in fact investigation, trial advocacy, moot court, acting, or writing; and/or relevant volunteer work; and/or life experiences, hobbies, or anything else you think might be relevant.)

**3.** **Please write about any one of the following**:

a) What is one of the biggest challenges, professional or otherwise, that you have faced? How did you deal with it? What did you learn from it?

b) Describe a situation in which you had a conflict with another person. How was the conflict resolved? If it was not resolved, why not?

c) Describe the most creative thing you have ever done.

**4. This clinic is a two-semester commitment, for 4 credits each semester. You will be expected to work around 12 hours per week (including the weekly seminar), on average over the course of each semester. During peak periods in your active cases your time commitment may sometimes exceed 12 hours per week, as your clients and others in the clinic will be depending on you. Is there anything that might inhibit your ability to meet these commitments? If so, please explain.**

**5. Do you expect to be working at a part-time job during the 2018-2019 academic year?**

If yes, list your probable employer and the semester(s) and number of hours per week that you plan to work.

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Semester(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hours/week: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note that students who will be employed by either the Federal or State government during any part of the academic year must have a conversation with me during the application period to ensure there won’t be any representation conflicts.

**6. It is strongly recommended that you not undertake another clinic or externship while enrolled in Community HeLP. However, I do not prohibit that possibility entirely. If you wish to engage in another clinic or externship during either semester of the academic year, please indicate here the other opportunity you would like to pursue, when it would occur, and where it is located. Please explain why you think you will be able to manage your time effectively between the two competing obligations.**

**7. Do you speak any languages other than English?**

If yes, indicate the level of fluency (fair, good, excellent, native speaker):

Language: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fluency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please read the following statements carefully before signing and submitting this application:**

I hereby make a firm offer to enroll in the UGA Community HeLP Clinic for the upcoming academic year. If my offer is accepted, I commit to doing the work required to professionally represent my clients and to meet the clinic’s objectives. I understand that I will need to spend at least 12 hours per week throughout the academic year on clinic-related work, and that when my cases become active my time commitment will sometimes exceed that. I understand that my cases, and therefore my clinical responsibilities, will sometimes continue through the exam periods and over the break between Fall and Spring semesters.

If I am accepted, I hereby affirm that I will register for the Clinic unless I decline the acceptance in writing to Professor Cade by 11:59 p.m. on April 6. I realize that after that date, I may withdraw only by permission of Professor Cade and the Associate Dean of Students, based on extraordinary circumstances.

If I am accepted from the waitlist on or after April 6, I hereby affirm that I will register for the Clinic unless I decline the acceptance in writing within 24 hours. I realize that after that date, I may withdraw only by permission of Professor Cade and the Associate Dean, based on extraordinary circumstances.

NOTE: You may type your signature or use “/s.” Electronic transmission of this application constitutes an electronic signature and has the same force as an actual signature.

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please also submit a CV and transcript** (unofficial is fine). You may omit or redact any indication of grades or class-rank if you prefer, but please do not redact your professors’ names. Note that I do not typically base enrollment decisions on your GPA or class-rank, but I do like to see which courses you have taken and who you took them with.

**Important Dates:**

March 21, 5pm: deadline to submit application, resume and transcript

April 4: date by which students will be notified of enrollment or position on waitlist

April 4-6: dates on which enrolled students may withdraw in writing (for any reason)

April 6-9: dates on which waitlisted students will be notified if any slots became available

April 10: confirmation of final enrollment