LLM in HEALTH LAW EXTERNSHIP GUIDE

To provide health law students with opportunities for practical, hands-on experiences, the Beazley Institute offers many externship opportunities in the Chicago area. Externship sites include health care providers, associations, government agencies, and non-profit agencies. Externships generally run for the length of each semester or term (fall semester, spring semester, or summer). Plan to apply for an externship the term prior to your desired start.

Eligibility Requirements

Students enrolled in the full-time LLM program are required to complete an externship for 1-3 credits. LLM students are encouraged to complete their externship in the fall semester, although LLM students may complete their externship in the spring semester or over the course of the entire year. It is the responsibility of each LLM student to obtain and register for an externship.

For LLM students, each credit hour requires approximately 55 hours of work at the externship site (1 credit=55 hours, 2 credits=110 hours, and 3 credits=165 hours). This means that over the course of the semester a student should plan to work approximately 4 hours per week per credit hour (4 hours per week for 1 credit, 8 hours per week for 2 credits, and 12 hours per week for 3 credits).

Step 1: Review Approved Health Law Externship Sites

Students should review the health law externship site descriptions and determine their top sites of interest. Descriptions of the specific sites can be found on the Approved Health Law Externship Sites webpage. Students are encouraged to consult with Beazley Institute Program Coordinator, Kristin Finn, to receive assistance in determining their goals and site preferences.

The Beazley Institute cannot guarantee externship spots at any site and encourages students to be proactive in seeking externships at new sites or other agencies of interest. It is the responsibility of each student to apply for and receive an externship. Applying early is recommended as many sites receive a large number of applications from Chicago area law schools.

Step 2: Preparing Application Materials

After making final externship site selections, students should begin by preparing application materials for their top 3 sites. Students should consult each site’s description and guidelines for instructions on preparing and submitting materials. It is critical that students follow the instructions for each site’s application materials and submit materials as stated in the site’s description on the Approved Health Law Externship Sites webpage.
Step 3: Externship Placement Acceptance and Registering for Credit

Externship sites expect students to accept placement offers and the Beazley Institute requires that students accept their first externship offer unless otherwise approved by Kristin Finn. After accepting an externship offer, students must complete an Acceptance Form and obtain the signature of their externship supervisor. Students should discuss with their supervisor the projects and goals of their externship placement and agree on the schedule and duration of the externship.

To register for credit, LLM students must submit both the acceptance form and the Graduate Law Programs Course Approval Form to Kristin Finn. An LLM student will not be enrolled for externship credit until this form is completed and submitted.

Step 4: Externship Evaluations

Students are responsible for distributing 2 evaluation forms to their site supervisors: the Health Law Externship Mid-Term Evaluation Form and the Health Law Externship Final Evaluation Form. Both are included in this packet. Supervisors may contact the Beazley Institute for assistance or with questions regarding the forms. Students must complete the Health Law Externship Student Evaluation Form upon completion of their externship. Externship credit will not be awarded until this form is received.

Credit and Grades

The Health Law Graduate Externship Course (714) is not graded. It is the responsibility of each student enrolled for an externship to ensure that all evaluations and documentation are submitted. Every student must complete all externship hours and duties at a site and submit the necessary documentation, including evaluations, to the Beazley Institute. Once it is determined that a student has satisfactorily completed externship requirements, a grade of pass will be entered.
HEALTH LAW EXTERNSHIP ACCEPTANCE FORM
This form must be completed by the student and signed by the externship supervisor. Please submit to Program Coordinator, Kristin Finn, by email at kfinn1@luc.edu.

Date:___________ Name:__________________________________ Degree Program/Year:_____________
Phone:___________ Email:__________________________ Desired Semester ___________________

Registering for Credit? YES NO Credit Hours Sought________________________
Externship Site:____________________________ Supervisor:__________________________
Supervisor Email:__________________________ Supervisor Phone:__________________________

EXTERNSHIP PROJECTS AND GOALS
(Supervisor and student should discuss projects and goals and summarize below.)
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

EXTERNSHIP HOURS AND DURATION
(Supervisor and student should discuss expected hours and duration and list below.)
Days/Hours:_____________________________________________________________________________
Start Date:___________________________ End Date:________________________________

SIGNATURES

_________________________________________ ________________________________
Student Signature & Date Supervisor Signature & Date

For Internal Use Only Date Received __________________________ Registered__________________________
Notes_______________________________________________________
HEALTH LAW EXTERNSHIP MID-TERM EVALUATION FORM

This form should be completed by the externship supervisor halfway through the agreed duration. Please submit to Program Coordinator, Kristin Finn, by email at kfinn1@luc.edu.

To Externship Supervisor: Please complete this mid-term evaluation of your Loyola student extern. Discuss your feedback with the student extern and submit this to the Assistant Director listed above.

Externship Site: ____________________________________________________________

Loyola Student Extern: ________________________________________________________

Supervisor Completing This Form: _____________________________________________

Supervisor Email: ________________________ Supervisor Phone: ________________________

1) Has the extern’s attendance been regular and punctual? YES____ NO____

Comments:

2) On what projects has the extern worked?

3) Please comment on the quality of the extern’s work. We appreciate your candid appraisal of the student’s strengths and weaknesses.

4) Please note any changes you would like the extern to make during the second part of their experience.

Additional Comments:

_____________________________________

Supervisor Signature & Date

For Internal Use Only

Date Received___________________ Action__________________________

Notes______________________________________________________________________________________________________
HEALTH LAW EXTERNSHIP FINAL EVALUATION FORM

This form should be completed by the externship supervisor at the end of the externship term. Please submit to Program Coordinator, Kristin Finn, by email at kfinn1@luc.edu.

**To Externship Supervisor:** Please complete this final evaluation of your Loyola student extern. Discuss your feedback with the student extern and submit this to the Assistant Director listed above.

**Externship Site:** ______________________________________________________

**Loyola Student Extern:** _________________________________________________

**Supervisor Completing This Form:** _______________________________________

**Supervisor Email:** _________________________ **Supervisor Phone:**_____________________

1) How well did the student grasp the underlying principles and goals of the assigned work?

   | Excellent | 1 | 2 | 3 | 4 | 5 | Poor |

   Comments:

2) How well did the student display the necessary skills to complete the assigned work?

   | Excellent | 1 | 2 | 3 | 4 | 5 | Poor |

   Comments:

3) Rate the overall quality of the student’s work.

   | Excellent | 1 | 2 | 3 | 4 | 5 | Poor |

   Comments:

4) Rate Loyola’s externship program, including communication with you, responsiveness to concerns, etc.

   | Excellent | 1 | 2 | 3 | 4 | 5 | Poor |

   Comments:

5) How often did you meet with the student to review his/her work and/or provide feedback?

6) Would you hire another Loyola student extern in the future?

_______________________________________
Supervisor Signature & Date

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**For Internal Use Only**  Date Received_________________  Action _______________________

**Notes______________________________________________________________________________________________________**
HEALTH LAW EXTERNSHIP STUDENT EVALUATION FORM

This form should be completed by the student at the end of their externship term. Please submit to Program Coordinator, Kristin Finn, by email at kfinn1@luc.edu.

Date:___________ Name:__________________ Degree Program/Year:______________
Phone:___________ Email:__________________ Desired Semester ________________

Are You Registered for Credit?   YES   NO   Credit Hours ________________

Externship Site:__________________ Supervisor:_____________________________________

ATTAINMENT OF GOALS
(Please briefly describe how/whether this externship allowed you to meet your externship goals.)
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Please rate the frequency of the following activities of your extern experience, with a rating of 0 indicating “never,” 1 indicating “occasionally,” 2 indicating “most of the time,” and 3 indicating “always.”

1) Legal research
   0 1 2 3
2) Legal writing
   0 1 2 3
3) Meetings with attorneys or coworkers
   0 1 2 3
4) Meetings with your supervisor
   0 1 2 3
5) Inclusion in department activities/meetings
   0 1 2 3

SITE FEEDBACK
(Please describe your overall experience at your site. Is this an experience you would recommend to other students? What would you change? Did your supervisor provide you with adequate feedback?)
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

_________________________________________
Student Signature & Date

For Internal Use Only
Date Received___________________ Credits Awarded_________________________________________
Notes_______________________________________________________________________________________________________