

**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 _____

PROPOSED EMPLOYMENT INFORMATION

Employment is requested for the ___ Fall of 20___ or ___ Spring 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

Date Received from Student _____
Date Forwarded to Dean (if applicable) _____
Date Student Notified _____