LL.M. Program Practicum Course Approval Form

Student's Name _____

Semester _____

Practicum Supervisor _____

Credits (1-2; guideline of 60 hours per credit) _____

Brief description of practicum work _____

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Signature of Student _____

Signature of Practicum Supervisor _____

Signature of Faculty Supervisor _____

Signature of Director of LL.M. Program _____

Date _____