



**FORDHAM LAW GRADUATE EXTERNSHIP PROGRAM**  
**Designation of Placement Supervisor and Acknowledgement of**  
**Program Requirements**

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

Semester and Year: \_\_\_\_\_

Host Institution: \_\_\_\_\_

The Host Institution designates the following individual as the Placement Supervisor for the student  
extern named above:

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

Phone Number: \_\_\_\_\_

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

*\*Please attach the Placement Supervisor's bio or CV.*

The Placement Supervisor and the Host Institution acknowledge that they have received and have read  
the Guidelines for Host Institutions and Placement Supervisors.

Signature of  
Placement Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_