



FACULTY SPONSOR RESPONSIBILITIES

Thank you for agreeing to serve as the faculty sponsor for a student in the Independent Clinical program. As a reminder, below is information about the student you have agreed to sponsor:

Student Name: _____

Placement: _____

Supervisor: _____

Term: Fall / Winter / Spring (please check one)

Fall Term: September 3, 2019 through December 2, 2019

Winter Term: January 6, 2020 through January 24, 2020

Spring Term: January 27, 2020 through April 24, 2020

AS A FACULTY SPONSOR I AGREE TO THE FOLLOWING:

- **Conflicts Check:** I have reviewed the student’s proposed independent clinical project and I have no personal or professional conflicts in taking on the role of Faculty Sponsor.
- **Advising Appointment:** I agree to meet with the student to discuss the academic paper and other student responsibilities.
- **Weekly Reflections:** I agree to review and advise on weekly reflection emails from the student addressing the work the student has engaged in, issues they have confronted, and what they have learned from practice. The Office of Clinical and Pro Bono Programs (OCP) at clinical@law.harvard.edu is also copied on these emails.
- **Academic Paper:** I approve the student’s topic for his/her 15-page academic paper (not a reflection paper) related to some aspect of the work they plan to do in their independent clinical placement. I agree to review the final 15 page academic paper. I understand that the paper cannot be work product the student produced during the placement. It must include footnotes and should involve some analysis of a policy and/or practice issue related to the placement, or some analysis of the organization at which they worked. The student must provide me a copy of this paper by **the last day of the fall term** (for fall independent clinicals) **or the last day of the spring term** (for winter and spring independent clinicals), **unless I grant an extension in writing.**
- **Review Supervising Attorney Evaluation of Student:** At the end of the term, the student’s supervising attorney will send an evaluation of the student to the Office of Clinical and Pro Bono Programs, which they will forward to me within two weeks after the last day of the term. I will use this evaluation, along with the student’s required paper and weekly reflection emails, to determine the student’s grade as credit/fail.
- **Submit Grade:** I will submit the student’s grade via Helios after the end of the semester. (I do not need to notify OCP of the grade).

FACULTY SPONSOR ACKNOWLEDGEMENT

I, _____, agree to all of the above.

Faculty Sponsor Name

Faculty Sponsor Signature:

Date:
