



FLORIDA INTERNATIONAL UNIVERSITY

## Office of Externship and Pro Bono Program

### STUDENT EVALUATION OF PRO BONO PLACEMENT

Please complete this form after completing work at your pro bono placement and submit to the Pro Bono Drop Box located in RDB 1010 (The Clinic)

**YOU WILL NOT RECEIVE CREDIT FOR YOUR PRO BONO SERVICE UNTIL THIS FORM HAS BEEN SUBMITTED FOR EACH PLACEMENT**

1. Name/Location of Placement Organization \_\_\_\_\_

\_\_\_\_\_

2. Name of Supervising Attorney \_\_\_\_\_

3. Name and Title of Supervisor \_\_\_\_\_

(If different than Supervising Attorney)

4. Date placement began \_\_\_\_/\_\_\_\_/\_\_\_\_ Date placement ended \_\_\_\_/\_\_\_\_/\_\_\_\_

5. Number of hours completed \_\_\_\_\_

6. Do you plan to work additional hours at this placement? Yes No

7. Type of placement (please choose one)

- ☐ FIU COL Student Organization
- ☐ Summer Position
- ☐ Pro Bono Program placement
- ☐ FIU COL Faculty/Program
- ☐ Student Initiated Placement
- ☐ Other (please explain)

\_\_\_\_\_

8. Did you receive monetary compensation while fulfilling your requirement?

Yes No

If yes, what amount and from what source? \_\_\_\_\_

9. Did you receive academic credit? Yes No

If yes, how many credits? \_\_\_\_\_

	Poor	Fair	Adequate	Good	Excellent
10. Adequacy of Training	1	2	3	4	5
11. Amount of Supervision	1	2	3	4	5
12. Quality of Supervision	1	2	3	4	5
13. Value placed on my work	1	2	3	4	5
14. I would recommend this site to Others	1	2	3	4	5

The Pro Bono Program's 30 hour requirement for all law students is a manifestation of the commitment of FIU Law, the faculty and the alumni to ensure that you [develop your professional identity and learn about a lawyer's role in providing access to justice](#) by assisting in providing legal educational and legal services to the poor, disadvantaged, and other individuals or groups unable to secure legal assistance to address critical problems.

Reflect upon the value of this pro bono experience as you answer the following:

	Not at all	Very little	Somewhat	Very much	Significantly
15. How did your public service work affect your interest in course work?	1	2	3	4	5
16. How did your public service work affect your knowledge of a new area of law?	1	2	3	4	5
17. How did your public service work improve your legal skills (e.g. research, interviewing, negotiation, etc.)?	1	2	3	4	5
18. How did the existence of the Pro Bono Service program affect your knowledge about pro bono opportunities?	1	2	3	4	5
19. How did your public service work affect your likelihood of performing future pro bono work?	1	2	3	4	5
20. Is this placement better suited to students who require less or more intensive supervision? Less More					
21. Which of your law school courses, if any, were helpful in performing work at this placement? _____					
22. What were the strengths of the placement? _____ _____ _____					

23. What were the weaknesses of the placement?

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24. How would you improve or change your placement?

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Reflect upon the value of your pro bono experience as you evaluate the PRO BONO PROGRAM

		Poor	Fair	Adequate	Good	Excellent
25.	Number of sites available	1	2	3	4	5
26.	Variety of placements	1	2	3	4	5
27.	Assistance in placement process	1	2	3	4	5
28.	Suggestions for improvement					

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Sharing this information helps us improve our support of clients, placement supervisors, and future students. These evaluation forms will be included in a binder in our office to aid students in selecting sites. If you indicate that you do not want your name included in the binder we will remove this portion below.

Student Name \_\_\_\_\_ Class of \_\_\_\_\_

Email \_Date \_\_\_\_\_

May we include your name and this portion in this binder? Yes No

Would you be willing to speak on a panel or presentation to 1Ls about your experience? Yes No

Are you willing to be contacted by students interested in this placement? Yes No

I hereby grant the FIU Law Pro Bono Service Program the right to use, for public relations or informational purposes, my name and likeness and/or any other materials from any source, including, but not limited to, student and supervisor evaluations regarding the Pro Bono Service Program.

Student \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_