

ROGER WILLIAMS UNIVERSITY LAW SCHOOL
REQUEST FOR ARTICLE II, RULE 9 CERTIFICATION

Students shall follow these instructions, in this order:

1. Complete Section A of this form.
2. Email the form to your supervising attorney and have them complete Section B.
3. Deliver or email the form to the Office of Student Finance and Records.

Location: SOL Bristol Campus, Room 294, 2nd floor
Email: studentfinancerecords@rwu.edu

4. Once certification is received, deliver copies to your supervising attorney and the Office of Student Finance and Records.

Section A (To be completed by student)

Student Name: _____ Phone Number: _____

Student Address: _____

Email Address: _____ Expected Graduation Date: _____

I am requesting certification recertification to practice as a senior law student for the following program:
Criminal Defense Clinic Environmental & Land Use Clinical Externship
Immigration Clinic Program
Public Interest Clinical Externship Program Independent internship
Prosecution Clinical Externship Program

I hereby certify that all information on this form is true, that I will deliver a copy of my Supreme Court Rule 9 Certification to my placement site before practicing law, and that if I do not take the Rhode Island Bar Examination the first time it is offered after my graduation, I will cease practicing law immediately.

Student Signature

Date

Section B (To be completed by supervising attorney)

Placement Site: _____ Start Date: _____ End Date: _____

Placement Site Address: _____

Supervising Attorney Name: _____ RI Bar No.: _____

Phone Number: _____ Email Address: _____

By signing this document, I hereby certify that _____ will be working under my general supervision without compensation on behalf of (check all that apply):

The state, including a subdivision thereof or a
municipal corporation
Indigent parties in criminal or civil proceedings
in (check all that apply):
District Court
Family Court

Rhode Island Traffic Tribunal
Any municipal court (including probate and
housing)
Any state or municipal administrative agency,
board, or department

I further certify that I am a member of the bar of this state, and that I am:

A special or assistant attorney general
A municipal solicitor
Employed by the Office of the Public Defender
or any other state agency
Associated with an organized and approved
program providing legal services to indigents
that is (check all that apply):

Funded in whole or in part by the federal
government
Funded in whole or in part by the Rhode Island
Bar Foundation
Sponsored by a law school accredited and
approved by the American Bar Assoc.

Supervising Attorney Signature

Date

Section C (To be completed by law school)

I hereby certify that the above-named student has successfully completed the equivalent of at least three full-time semesters of the student's course of law school study, is of good character, legal ability, and training, and:

Has completed the following course(s) (check all that apply): Evidence Trial Practice
Is enrolled in the following course(s) (check all that apply): Evidence Trial Practice

Andrew Horwitz, Assistant Dean, Experiential Education

Date