**Health Law Certificate Application Form**

Please complete and submit to Rebecca Hall in the Law & Health Care Program Office, Room 249 or by email: r.hall@law.umaryland.edu. You must submit this form before April 1st of your final law school semester for May graduates or November 1st for December graduates.

**Student Name:**

**Address to send certificate:**

**Personal e-mail if you wish to be on the Law & Health Care Program Alumni Listserv after graduation:**

**Anticipated Graduation Date:**

|  |  |  |  |
| --- | --- | --- | --- |
| **I. Classroom Component**  At least 6 credits required | **Semester/****Year** | **Professor** | **Credits Applied Toward Certificate** |
| Health Care Law & Policy (required) |  |  |   |
| Other courses/seminars: Please list the title of the course below. (Note: independent written work done on a health law topic can be included) |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **II. Experiential Component**At least 3 credits required, maximum of 6 credits  |  |  |  |
| **a. Clinics** |  |  |  |
| Public Health Law Clinic |  |  |  |
| Civil Rights of Persons with Disabilities Clinic |  |  |  |
| Health Care Delivery and HIV/AIDS Clinic |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **b. Health Law Externships**  |  |  |  |
| Name of Placement 1: |  |  |  |
| Name of Placement 2:  |  |  |  |
| **III. Other Coursework** Not considered health law coursework butmay be used to satisfy overall credit requirement |  |  |  |
| Administrative Law(maximum of 3 credits)  |  |  |  |
| Employee Benefits Law Seminar/Course (ERISA) (1 credit allowed toward Health Law Certificate) |  |  |  |
| Families with Special Needs Children Seminar (1 credit allowed toward Health Law Certificate) |  |  |  |
| Health Law Practice Workshop (required component of all Health Law Externships) |  |  |  |
| Participation in Journal of Health Care Law & Policy (maximum of 6 credits) |  |  |  |
| **IV. Research and Writing Component:** Check one and complete attached Health Law Certificate Writing Requirement Form |  |
| \_\_\_ Seminar Paper\_\_\_ Independent Written Work\_\_\_ Health Law Moot Court\_\_\_ *Journal of Health Care Law & Policy* (a published note only)\_\_\_ Health Law Writing Competition (identify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **TOTAL CREDITS:** **(17 required)** |  |
| **Student Signature:** | **Date:** |

**Health Law Certificate Writing Requirement**

In order to satisfy the *Research and Writing* component of the Health Law Certificate, you must provide confirmation that your project was completed to the satisfaction of your supervising professor or faculty member. **If it is a graded paper, you must receive a grade of B or higher for the paper to count toward the health law certificate.** You must submit a copy of the paper with the grade noted on it along with this form. For non-graded papers, you must submit a copyof the paper along with this form. This form must be completed and submitted to Rebecca Hall in the Law & Health Care Program Office, Room 249 or by email: r.hall@law.umaryland.edu. It may be turned in before, but **not later than** the date that the “Certificate in Health Law” form must be submitted (i.e., **April 1 of** **final semester for May graduates, November 1 for December graduates**). It is recommended that you submit this form to the L&HCP as soon as you complete your writing project and receive your grade.

**Student Name:**

**Anticipated Graduation Date:**

**Writing Project Completed in Satisfaction of Health Law Certificate**

**\_\_\_ *Seminar Paper***

 **HLS Course Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Paper Title/Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Professor’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\_\_\_ Independent Written Work***

 **Paper Title/Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Professor’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\_\_\_ Health Law Moot Court***

**Paper Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Faculty Advisor’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\_\_\_ Journal of Health Care Law & Policy***

 **Paper Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Faculty Advisor’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\_\_\_ Health Law Writing Competition***

 **Competition Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Paper Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

  **L&HCP Director’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**