

**NORTH CAROLINA STATE BAR
PRACTICAL TRAINING OF LAW STUDENTS/CLINICAL LEGAL EDUCATION PROGRAMS
SUPERVISING ATTORNEY STATEMENT (LAW SCHOOL CLINIC)**

Form Date: December 29, 2025

27 N.C. Admin. Code 1C, Sect. .0200

[Date]

I am a supervising attorney for the _____ at
[name of clinic]

_____. Pursuant to the North Carolina State Bar's Rules
[name of school]

Governing the Practical Training of Law Students, 27 N.C. Admin. Code 1C, Section .0200 (the Rules), I

assume responsibility for the supervision of the law students listed below while they are legal interns

and enrolled in the clinic beginning _____ through _____ and certify that I will

adequately supervise the legal interns in accordance with the Rules. [print student names below or
attach list]

_____	_____	_____
_____	_____	_____
_____	_____	_____

[Signature]

[Date]

[Print Name]

[Bar Number and Jurisdiction]

[Law School]

[Mailing Address]

[Email Address (Required)]

[Phone Number]