

## ASU's Certificate in Health Law & Policy

### Student "Check Out" Form

For students seeking ASU's Certificate in Health Law and Policy on graduation, please provide the following information:

Name: \_\_\_\_\_

ASU Email Address: \_\_\_\_\_

ASU Law - Degree Sought (e.g., JD, LLM, MLS): \_\_\_\_\_

Month/Year of Graduation: \_\_\_\_\_

ASU Law Faculty Advisor: \_\_\_\_\_

#### Certificate Requirements:

**1. Course Work & Grade Requirements:** Please list all classes you have taken (or are currently enrolled) that you intend to count toward the Certificate (assuming successful completion) including:

- a) the **semester** in which it was taken;
- b) the **number of credit hours** earned (or forthcoming); and
- c) your **grade** in each course completed (where available).

Any course below which is not listed on the Certificate Program Requirements [webpage](#) requires your request for a waiver from the Certificate Director to apply toward the Certificate.

**Minimum Average Grade Requirement.** A minimum of 15 credit hours and cumulative average grade of at least 3.0 for listed courses are required to earn the Certificate. Students must also earn a minimum grade of a "B-" in each of the ASU Law courses [or law-related courses taken outside of ASU Law] applied toward the Certificate. Courses receiving a "Pass" on a Pass/Fail basis are excepted from this requirement.

**Core Courses** (students must have taken these classes to be eligible for the Certificate):

☐ **Health Law & Policy**: Semester + Year: \_\_\_\_\_ Grade: \_\_\_\_\_

☐ **Public Health Law & Ethics**: Semester + Year: \_\_\_\_\_ Grade: \_\_\_\_\_

**Elective Courses** (*note* – these courses do not include Center or other externship credits):

Course Title [& school if other than ASU Law]	Professor	Semester & Yr	Credits	Grade
<b>TOTAL CREDITS (elective courses)</b>				

**2. Active Participation in Health Law:** Each student must participate in at least 1 of the following activities (other activities consistent with this listing may also be considered by the Certificate Director). Please check as many that apply:

☐ Research assistant/extern for at least 1 semester or summer session during your studies at ASU Law with ASU's **Center for Public Health Law & Policy**

☐ Research assistant/extern for at least 1 semester or summer session during your studies at ASU Law with **other centers/programs at ASU Law** (e.g., Center for Law, Science & Innovation) where the dominant focus of the student's work was on health-related topic[s]. Please identify the center/program and primary focus of your work:

Center/program: \_\_\_\_\_

Health-related foci: \_\_\_\_\_

☐ Active participation as an officer (not merely a representative) for at least 1 year in the student **Health Law Society**. Please identify your title/role and period of service:

Officer/Title (e.g., President): \_\_\_\_\_

Service Period (e.g., Semester, Year): \_\_\_\_\_

☐ **Editorial board position** for at least 1 year with JURIMETRICS. Please identify your position and service period:

Position (e.g., Articles Editor): \_\_\_\_\_

Service Period (e.g., Semester, Year): \_\_\_\_\_

☐ **Health/public health law-based externship** (upon approval from Certificate Director) for at least 1 semester or summer session. Please provide additional information below:

Externship entity: \_\_\_\_\_

Externship legal supervisor: \_\_\_\_\_

Brief description of externship roles/responsibilities: \_\_\_\_\_

**3. Writing Requirement:** Each student must write a substantial paper on a health/public health law topic of at least 15 single-spaced pages under guidance of a ASU Law faculty member. Papers satisfying ASU Law's writing requirements or law journal requirements can fulfill this requirement. Co-authored papers with at least 15 single-spaced typewritten pages per co-author may also satisfy this requirement with the Certificate Director's approval.

Paper Title: \_\_\_\_\_

Brief Description of Thesis: \_\_\_\_\_

\_\_\_\_\_

Faculty Advisor: \_\_\_\_\_

Course or Independent Study (if relevant): \_\_\_\_\_

Semester + Year: \_\_\_\_\_

Length: \_\_\_\_\_ pages | Citation (if published): \_\_\_\_\_

**Request for Waivers:** In certain unforeseen or exigent circumstances, the Certificate Director is authorized to modify, waive, or reconfigure Certificate requirements (except related to completion of Core Courses) in the interests of equity and fairness. If you are seeking a waiver for any Certificate requirements, please explain below circumstances supporting a waiver.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **Post-Graduate Contact Information**

Email: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address to which Certificate should be mailed (if not personally distributed at or near to graduation):

\_\_\_\_\_

\_\_\_\_\_

Please email or return this completed form to **Professor James G. Hodge, Jr., J.D., LL.M.**, [james.hodge.1@asu.edu](mailto:james.hodge.1@asu.edu) by the date requested via email correspondence.