

**JMU Pre-Law/Legal Studies Unpaid Internship Scholarship  
Employer Verification Form**

A representative (preferably your direct supervisor) from the organization where you plan to complete your internship must sign the form below. Please print clearly or type.

Organization/Department: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

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

Work Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

I hereby certify that \_\_\_\_\_ has been selected to undertake work with this organization and that this is an unpaid internship.

Work will begin on \_\_\_\_\_ and end on \_\_\_\_\_.  
(start date) (end date)

Work will be done on \_\_\_\_\_ for \_\_\_\_\_.  
(days/week) (indicate hours/day)

I verify that this internship opportunity is consistent with the requirements of the Fair Labor Standards Act (FLSA) and applicable state and local law.  
<http://www.dol.gov/whd/regs/compliance/whdfs71.htm>).

Signature of Supervisor:

\_\_\_\_\_

Date: \_\_\_\_\_

\*Institutional funding through this program is made available with the sole intention of supporting students' expenses (such as educational, housing, and/or travel expenses). This support enables students to participate in unpaid opportunities, while gaining valuable experience. Funding is not provided in lieu of compensation for work.

**Employer:** Please send completed form back to the student for them to submit as part of their application by the deadline in mid-April.