UNITED STATES DISTRICT COURT WESTERN DISTRICT OF NEW YORK

IN THE MATTER OF COMPLIANCE WITH THE WESTERN DISTRICT OF NEW YORK STUDENT PRACTICE RULE

(Name of Student)	(Name of Supervising Attorney)
Address and Telephone Number:	Address and Telephone Number:
Name of Law School student is attending:	
Number of semesters student has completed:	
TO BE COMPLETED BY LAW STUDENT:	
Divisions of the State of New York, and as interpret United States Court of Appeals for the Second C procedural and evidentiary rules relevant to the ac	Conduct as adopted from time to time by the Appellate ted and applied by the United States Supreme Court, the ircuit, and this Court; that I am familiar with the federation in which I am appearing; and that I am receiving nor management rendering services in accordance with part (c)(5) of the lew York.
(Date)	(Student's Signature)
TO BE COMPLETED BY THE DEAN OR A FAC	ULTY MEMBER OF THE STUDENT'S LAW SCHOOL
I certify that this student has completed at the best of my knowledge, qualified to provide the	least two (2) semesters of law school work, and is, to legal representation permitted by these Rules.
(Date)	(Signature of Dean or Faculty Member)
APPROVED:	
UNITED STATES DISTRICT JUDGE	_
DATE:	

	CASE FILE #
UNITED STATES DISTRICT COURT WESTERN DISTRICT OF NEW YORK	
	OMPLETED BY THE CLIENT TUDENT IS RENDERING SERVICES
I authorize other proceedings on my behalf, and to prepare admitted to the Bar and that he/she will appear p of New York, Student Practice Rule.	, a Law Student, to appear in court or a e documents on my behalf. I am aware that he/she is no oursuant to the United States District Court, Western Distric
(Date)	(Signature of Client)
(If more than one client is involved, approvals approvals from named plaintiffs shall be attached	from each shall be attached. If a class action is involved ed.)
	ED BY THE LAW STUDENT'S VISING ATTORNEY
	t's work. I authorize this student to appear in court or at othe accompany the student at such appearances, and sign an personal responsibility for his/her work.
(Date)	(Signature of Supervising Attorney)
APPROVED:	

(DATE)

UNITED STATES DISTRICT JUDGE