



STUDENT PRO BONO LOG

Name: _____ **Graduation Date (Month/Year):** _____

Pro Bono Placement: _____

Name of Supervising Attorney: _____

Placement Contact Information (phone/email): _____

**Please verify prior to volunteering that the pro bono placement has been pre-approved. Approved placements are found in the Pro Bono Handbook. To request approval of a new pro bono placement, contact Joanna Auchettl at jauchettl@law.ufl.edu. Service logs should be submitted through Symplicity.*

Date	Description	Hours
TOTAL HOURS		

By submitting this log, I certify that the information contained is true, that the service hours described above conform with the UF Law definition of pro bono, and that all pro bono work was completed under the supervision of a licensed attorney. _____ (student initials)

Supervisor's Signature