## SOUTHERN METHODIST UNIVERSITY DEDMAN SCHOOL OF LAW

 Public Service Program
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 Director
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## **CONFIRMATION AGREEMENT**

Student Name		Class of 20
Address(Street)		Zip Code
(Street)	(City, State)	
Telephone Number	E-mail	
Date	SMU ID#	
Sponsoring Organization	VITA 2025	
Address SMU Dedman School of	of Law_	
Contact Person Lynn Moubry	Title <u>A</u>	dministrative Specialist I Atty? (No)
Telephone Number(s) 214-768-	2761 Fax Nu	mber 214-768-4688
Email Lynn Moubry (Public S	Service): Lmoubry@smi	ı.edu
Proposed Assignment _Tax returns for lo	w income	
Estimated Total Hours of Work:	30	(may be modified during course of
STUDENT: If your Supervisor is not the	Contact Person, please list	their name(s) and phone number(s) below.
NameLaura Burstein, Director of	Public Service	214-768-2567
I agree to perform all tasks in a profession of confirm that the above student will recent the been admitted to the Bar, and cannot its clients and that the organization will necessaring from any actions that may subunderstand that SMU Law School carries under the Public Service Program.	eive professional supervis represent or provide lega not rely on the student's w ject the organization, pro	ion. I acknowledge that the student has l advice to the organization, program or ork product in taking any action or gram or its clients to legal liability. I
		Contact Person