

WOMEN, GENDER & THE LAW

CONCENTRATION REQUIREMENTS WORKSHEET

The information that follows is an abbreviated version of the requirements for completion of the Women, Gender & Law Concentration (the "Concentration") at the School of Law. Please consult the Academic Rules for complete rules. The information contained below must be verified by the Concentration Director. A communication noting significant discrepancies or problems, if any, will be made via email to your Pace Law School email account and a copy will be placed in your file. **OBTAIN THE SIGNATURE OF THE CONCENTRATION DIRECTOR BEFORE SUBMITTING THIS FORM TO THE REGISTRAR'S OFFICE. THE FORM IS DUE NO LATER THAN SIX (6) WEEKS AFTER THE DATE OF THE LAST FINAL EXAMINATION OF THE REGULAR EXAMINATION PERIOD IN THE SEMESTER IN WHICH THE STUDENT EXPECTS TO GRADUATE.** Schedule A may be filed as a separate document at the beginning of each semester in which the student takes one or more Concentration courses (other than the Foundational Course, for which no advance approval is required).

Name: _____

Anticipated Graduation Date: _____

Student ID U#: _____

Phone: _____

E-Mail Address: _____

NOTE: At least 15 total credits are required for successful completion of the Concentration. With the exception of the Foundational Course, in order for any course to count toward satisfaction of the Concentration requirements, ordinarily advance approval of the Concentration Director is required. See "Additional Requirements" below.

IN ORDER TO RECEIVE ABOVE-NAMED CONCENTRATION FROM THE SCHOOL OF LAW YOU MUST:

	Requirement	Comments
1.	MEETING EACH SEMESTER WITH CONCENTRATION DIRECTOR: Ordinarily, before the end of the drop/add period in which a student is enrolled in any "Focused Course," "Related Course," or "Capstone/Skills Course," the student must present to and have signed by the Concentration Director Schedule A to this Concentration Requirements Worksheet. The signature of the Concentration Director on pages of Schedule A and/or at the end of this form constitutes the Concentration Director's good faith determination that you either have completed or are scheduled to complete a particular requirement for the Concentration, subject to final verification by the Academic Dean and/or Registrar.	
2.	FINAL SEMESTER MEETING WITH CONCENTRATION DIRECTOR: Within six (6) weeks of the end of the regular examination period in the semester in which you have completed all of the courses needed to satisfy the requirements of the Concentration, please complete this form and meet with the Concentration Director. This form must be accompanied by a copy of your final transcript. The signature of the Concentration Director on pages of Schedule A and at the end of this form constitutes the Concentration Director's good faith determination that you either have completed or are scheduled to complete all of the requirements for the Concentration, subject to final verification by the Academic Dean and/or Registrar.	
3.	COMPLETION OF WORKSHEET: Ordinarily, students should submit to the Registrar this Concentration Requirements Worksheet, signed by the Concentration Director, <u>with a copy of each signed page of Schedule A no later than six (6) weeks after the date of the end of the regular examination period in the semester in which the student expects to graduate.</u> In the exercise of sole and absolute discretion, the Academic Dean may make reasonable extensions to this deadline.	
4.	REQUIRED FOUNDATIONAL COURSE FOR ALL CONCENTRATORS: To complete the Concentration, a student must complete the following course. Please indicate the semester (e.g., fall/spring) and year in which you did take or are planning to take the course and the grade received (if the course already taken; if you are currently taking the course, write "N/A" for grade): Family Law: Semester: _____ Year: _____ Grade: _____	

Student Name: _____

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5.	<p>FOCUSED COURSES: All students must take at least 1 of following electives. Please check off the box in front of the name of the course(s) that you intend to apply toward satisfaction of the Concentration requirement. Please also indicate the number of credits allocated to the course, the semester (e.g., fall/spring) and year in which you did take or are planning to take the course, and the grade received (if the course already taken; if you are currently taking the course, write "N/A" for grade):</p>					
		Number of Credits	Semester	Year	Grade	Comments
	<input type="checkbox"/> Advanced Family Law					
	<input type="checkbox"/> Advanced Issues in Criminal Law					
	<input type="checkbox"/> Advanced Issues in Criminal Law: Sex Crimes					
	<input type="checkbox"/> Bioethics and Medical Malpractice					
	<input type="checkbox"/> Civil Rights Law					
	<input type="checkbox"/> Collaborative Law					
	<input type="checkbox"/> Comparative Family Law					
	<input type="checkbox"/> Critical Race Theory					
	<input type="checkbox"/> Employment Discrimination					
	<input type="checkbox"/> Employment Law Survey					
	<input type="checkbox"/> Feminist Legal Theory					
	<input type="checkbox"/> Public Health Law					
	<input type="checkbox"/> Sexuality, Gender & the Law					
6.	<p>CAPSTONE/SKILLS COURSES: All students must take 1 of the following Capstone/Skills courses. Please indicate the semester (e.g., fall/spring) and year in which you did take or are planning to take the course(s) and the grade received (if the course already taken; if you are currently taking the course, write "N/A" for grade):</p>					
	<input type="checkbox"/> Family Court Externship (minimum 3 credits): Semester: _____ Year: _____ Grade: _____					
	<input type="checkbox"/> Externship: Legal Services/Public Interest/Health Law (sex-related or gender-related placement required): <p style="margin-left: 40px;">Semester: _____ Year: _____ Grade: _____</p> <p style="margin-left: 40px;">Name of Placement Organization for Externship:</p> <p style="margin-left: 40px;">_____</p> <p style="margin-left: 40px;">Was externship sex-related or gender-related?</p> <p style="margin-left: 40px;">YES: _____ NO: _____ (CHECK ONE)</p> <p style="margin-left: 40px;">Did externship faculty supervisor approve the application of the externship in satisfaction of the requirements of the Concentration?</p> <p style="margin-left: 40px;">YES: _____ NO: _____ (CHECK ONE) DETAILS: _____</p> <p style="margin-left: 40px;"><i>(provide details of email/phone conversation between student and externship faculty supervisor or Concentration Director and faculty supervisor, or obtain signature of externship faculty supervisor)</i></p>					

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	<p><input type="checkbox"/> Externship: Criminal Justice (sex-related or gender-related placement required):</p> <p>Semester: _____ Year: _____ Grade: _____</p> <p>Name of Placement Organization for Externship:</p> <p>_____</p> <p>Was externship sex-related or gender-related?</p> <p>YES: _____ NO: _____ (CHECK ONE)</p> <p>Did externship faculty supervisor approve the application of the externship in satisfaction of the requirements of the Concentration?</p> <p>YES: _____ NO: _____ (CHECK ONE) DETAILS: _____ <i>(provide details of email/phone conversation between student and externship faculty supervisor or Concentration Director and faculty supervisor, or obtain signature of externship faculty supervisor)</i></p>
	<p><input type="checkbox"/> Guided Externship (sex-related or gender-related placement required):</p> <p>Semester: _____ Year: _____ Grade: _____</p> <p>Name of Placement Organization for Externship:</p> <p>_____</p> <p>Was externship sex-related or gender-related?</p> <p>YES: _____ NO: _____ (CHECK ONE)</p> <p>Did externship faculty supervisor approve the application of the externship in satisfaction of the requirements of the Concentration?</p> <p>YES: _____ NO: _____ (CHECK ONE) DETAILS: _____ <i>(provide details of email/phone conversation between student and externship faculty supervisor or Concentration Director and faculty supervisor, or obtain signature of externship faculty supervisor)</i></p>
	<p><input type="checkbox"/> Guided Research (sex-related or gender-related project required; minimum 2 credits):</p> <p>Semester: _____ Year: _____ Grade: _____</p> <p>Was project sex-related or gender-related?</p> <p>YES: _____ NO: _____ (CHECK ONE)</p> <p>Did guided research faculty supervisor approve the application of the project in satisfaction of the requirements of the Concentration?</p> <p>YES: _____ NO: _____ (CHECK ONE) DETAILS: _____ <i>(provide details of email/phone conversation between student and guided research faculty supervisor or Concentration Director and faculty supervisor, or obtain signature of guided research faculty supervisor)</i></p>

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	<p><input type="checkbox"/> Advanced Legal Research (sex-related or gender-related final project required):</p> <p>Semester: _____ Year: _____ Grade: _____</p> <p>Was final project sex-related or gender-related?</p> <p>YES: _____ NO: _____ (CHECK ONE) DETAILS: _____</p> <p>Did Advanced Legal Research instructor approve the application of the project in satisfaction of the requirements of the Concentration?</p> <p>YES: _____ NO: _____ (CHECK ONE) DETAILS: _____ <i>(provide details of email/phone conversation between student and instructor or Concentration Director and instructor, or obtain signature of Advanced Legal Research instructor)</i></p>
	<p><input type="checkbox"/> Pro Bono Scholars Program Participation (sex-related or gender-related placement required):</p> <p>Semester: _____ Year: _____ Grade: _____</p> <p>Name of Placement Organization for Pro Bono Scholar:</p> <p>_____</p> <p>Was placement sex-related or gender-related?</p> <p>YES: _____ NO: _____ (CHECK ONE)</p> <p>Did Pro Bono Scholar faculty supervisor approve the application of program participation in satisfaction of the requirements of the Concentration?</p> <p>YES: _____ NO: _____ (CHECK ONE) DETAILS: _____ <i>(provide details of email/phone conversation between student and Pro Bono Scholar faculty supervisor or Concentration Director and faculty supervisor, or obtain signature of Pro Bono Scholar faculty supervisor)</i></p>
	<p><input type="checkbox"/> Any seminar in which student submits a paper that would be eligible to earn upper-level writing requirement (sex or gender-related final paper required; seminar paper does not satisfy any other skills-related requirement the school may have):</p> <p>Semester: _____ Year: _____ Grade: _____</p> <p>Name of Seminar: _____</p> <p>Was final paper sex-related or gender-related?</p> <p>YES: _____ NO: _____ (CHECK ONE) DETAILS: _____</p> <p>Did seminar instructor approve the application of the seminar in satisfaction of the requirements of the Concentration?</p> <p>YES: _____ NO: _____ (CHECK ONE) DETAILS: _____ <i>(provide details of email/phone conversation between student and seminar instructor or Concentration Director and seminar instructor, or obtain signature of seminar instructor)</i></p>

Student Name: _____

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Any semester-long involvement in clinical program offered by John Jay Legal Services (sex-related or gender-related casework required):

Semester: _____ **Year:** _____ **Grade:** _____

Name of Clinic:

Was casework sex-related or gender-related?

YES: _____ **NO:** _____ (CHECK ONE) **DETAILS:** _____

Did clinical supervisor approve the application of the clinical work in satisfaction of the requirements of the Concentration?

YES: _____ **NO:** _____ (CHECK ONE) **DETAILS:** _____
(provide details of email/phone conversation between student and clinical supervisor or Concentration Director and clinical supervisor, or obtain signature of clinical supervisor)

7. *RELATED COURSES: In addition to (a) the Foundational Course (Item 4 above); (b) 1 Focused Course (Item 5 above); (c) 1 Capstone/Skills Course (Item 6 above), students must take 4 additional courses from the list of "Focused Courses" (Item 5 above) and/or "Capstone/Skills Courses" (Item 6 above) and/or the list of "Related Courses" below, except the same course may not be count as satisfying this 4-course requirement and the Foundational Course requirement and/or Focused Course Requirement and/or the Capstone/Skills Course requirement). To use a colloquial expression, no "double dipping" with courses (although there can be "cross dipping" between/among concentrations.*

Please check off the box in front of the name of the courses that you intend to apply as a "Related Course" toward satisfaction of the Concentration requirements. Please also indicate the number of credits allocated to the course, the semester (e.g., fall/spring) and year in which you did take or are planning to take the course, and the grade received (if the course already taken; if you are currently taking the course, write "N/A" for grade):

		Number of Credits	Semester	Year	Grade	Comments
<input type="checkbox"/>	Asylum & Comparative Refugee Law					
<input type="checkbox"/>	Animal Law					
<input type="checkbox"/>	Children and the Law					
<input type="checkbox"/>	Environmental Justice					
<input type="checkbox"/>	Elder Law					
<input type="checkbox"/>	Estate & Gift Tax Law and Planning					
<input type="checkbox"/>	Estate Planning					
<input type="checkbox"/>	Federal Estate & Gift Taxation					
<input type="checkbox"/>	Health Law in America					
<input type="checkbox"/>	Human Rights and the Environment					
<input type="checkbox"/>	Immigration Law					
<input type="checkbox"/>	International Criminal Law					
<input type="checkbox"/>	Internal Human Rights					
<input type="checkbox"/>	Internet Law: Regulation of Social Media					
<input type="checkbox"/>	Juvenile Justice					
<input type="checkbox"/>	Matrimonial Practice					

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	<input type="checkbox"/> Poverty Law					
	<input type="checkbox"/> Prisoners' Rights					
	<input type="checkbox"/> Privacy and Information Law					
	<input type="checkbox"/> Prosecution of War Crimes					
	<input type="checkbox"/> Surrogates Practice					
	<input type="checkbox"/> Wills, Trusts & Estates					
	<input type="checkbox"/> Such one or more other courses as may be designated from time to time by mutual agreement of the Concentration Director and the Associate Dean for Academic Affairs					
8.	<p>TOTAL NUMBER OF CONCENTRATION COURSES STUDENT EXPECTS TO COMPLETE/ACTUALLY COMPLETED (add number of courses student expects to complete/actually completes from Items 5, 6 and 7):</p> <p>_____ (7 separate courses minimum)</p> <p>TOTAL NUMBER OF CONCENTRATION CREDITS STUDENT EXPECTS TO COMPLETE/ACTUALLY COMPLETED (add number of credits associated with courses student expects to complete/actually completes from Items 5, 6 and 7):</p> <p>_____ (15 credits minimum)</p>					
9.	<p>GPA REQUIREMENTS: In order to qualify for the Concentration, you must achieve an average of B or better in all Concentration courses, with no grade below a C. You must maintain an overall GPA of 2.5 or better.</p> <p>a. GPA in Concentration courses only: _____ (calculate current GPA within Concentration courses, if all not yet completed)</p> <p>b. Did you receive a grade below a C in any Concentration course?</p> <p>YES: _____ NO: _____ (CHECK ONE)</p> <p>c. Overall GPA: _____</p>					

Reminder: No Concentration may be awarded without receipt of final grades and successful completion of all Concentration requirements as certified by the Concentration Director and the Academic Dean and/or Registrar. For that reason, any designation of a concentration at the Law School's graduation ceremony is provisional only.

Student Verification:

The information on this form is true and correct to my knowledge. I acknowledge that I have read and understand the requirements for the awarding of the Concentration as listed in the Academic Rules and Policies, and that I am responsible for meeting those requirements.

Student's Signature	Date:
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Concentration Director Verification:

I confirm that the student has met with me and I have reviewed the information presented on this form by the student. Based on good faith belief that the information contained on this form and prepared by the student is accurate, it appears that the student has satisfied or will satisfy all of the requirements of the Concentration.

Concentration Director's Signature	Date:
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Student's Name: _____

WOMEN, GENDER & THE LAW
SCHEDULE A TO CONCENTRATION
REQUIREMENTS WORKSHEET

OVERVIEW AND INSTRUCTIONS: A distinguishing component of the Women, Gender & Law Concentration is the opportunity for faculty interaction, guidance and feedback so that the student is able to choose a deliberate and cohesive program of study that is unified in its relevance to women, gender and the law. With the exception of the Foundational Course, **in order for any course to count toward satisfaction of the Concentration requirements, ordinarily advance approval of the Concentration Director is required.** Students who have taken or are enrolled in courses that they wish to have retroactively counted toward the Concentration should meet with the Concentration Director.

Students must complete an entry on Schedule A for each and every Focused Course, Capstone/Skills Course or Related Course that they intend to apply prospectively or retroactively toward satisfaction of the Concentration requirements. This can be done by completing a separate Schedule A with respect to each individual course, or adding additional pages to an existing Schedule A, once the student has filed the student's first Schedule A. After obtaining the Concentration Director's approval and signature, students must make and retain a copy of all pages of Schedule A and submit the original page(s) to the Registrar. In all cases, it is the individual student's responsibility to retain copies of each and every page of any originally-signed Schedule A.

STUDENT-PROVIDED COMMENTS/REFLECTIONS REQUIRED FOR EACH CONCENTRATION COURSE OTHER THAN FAMILY LAW: For each course (other than the Foundational Course) intended to satisfy the Concentration requirements, when prompted for "Student Comments/Reflections," in no more than one paragraph, please describe how the particular course relates to the Concentration and your interest in Women, Gender & the Law. Topics that a student may, but need not, address include whether the course builds on, departs from or relates to other courses you have taken or other experiences you have had; what you expect to learn in the course; any specific goals or challenges you have for yourself with respect to the course; how the course fits with your overall educational and professional development objectives and/or career goals.

Name: _____

Anticipated Graduation Date: _____

Student ID U#: _____

Phone: _____

Name of Course: _____

Number of Credits: _____

Semester: _____

Year: _____

Student's Comments/Reflections: _____

Concentration Director's Name (printed): _____

Concentration Director's Signature: _____

Date Signed by Concentration Director: _____

Student's Name: _____

E-Mail Address: _____

(copy this page as many times as necessary so that there is one entry per course)

Name of Course: _____
Number of Credits: _____
Semester: _____
Year: _____
Student's Comments/Reflections: _____

Concentration Director's Name (printed): _____
Concentration Director's Signature: _____
Date Signed by Concentration Director: _____

Name of Course: _____
Number of Credits: _____
Semester: _____
Year: _____
Student's Comments/Reflections: _____

Concentration Director's Name (printed): _____
Concentration Director's Signature: _____
Date Signed by Concentration Director: _____

Student's Name: _____

(copy this page as many times as necessary so that there is one entry per course)

Name of Course: _____
Number of Credits: _____
Semester: _____
Year: _____
Student's Comments/Reflections: _____

Concentration Director's Name (printed): _____
Concentration Director's Signature: _____
Date Signed by Concentration Director: _____

Name of Course: _____
Number of Credits: _____
Semester: _____
Year: _____
Student's Comments/Reflections: _____

Concentration Director's Name (printed): _____
Concentration Director's Signature: _____
Date Signed by Concentration Director: _____

Student's Name: _____

(copy this page as many times as necessary so that there is one entry per course)

Name of Course: _____
Number of Credits: _____
Semester: _____
Year: _____
Student's Comments/Reflections: _____

Concentration Director's Name (printed): _____
Concentration Director's Signature: _____
Date Signed by Concentration Director: _____

Name of Course: _____
Number of Credits: _____
Semester: _____
Year: _____
Student's Comments/Reflections: _____

Concentration Director's Name (printed): _____
Concentration Director's Signature: _____
Date Signed by Concentration Director: _____