Fellowship Applicant's Certification:

I, _____hereby certify the following:

Regarding my application for a Skadden Fellowship:

- The facts set forth in my Skadden Fellowship ("Fellowship") application are true and complete to the best of my knowledge.

- I have reviewed and meet the Eligibility requirements listed on the Skadden Foundation's (the "Foundation") website and I am not a spouse, child, grandchild, great grandchild, sibling, niece, nephew, parent or other ancestor, or spouse of any such an individual, of any partner, former partner, or employee of Skadden, Arps, Slate, Meagher and Flom LLP, or of any member of the Foundation's staff, Board of Directors, or Selection Trustees.

- In connection with the release of information relating to my application, I authorize the Foundation to contact the organizations and individuals I have named in this application, and I hereby release the Foundation and the named organizations and individuals, including their employees, officers, directors and trustees, from liability.

- My application for a Fellowship indicates my intention to accept and complete the two-year Fellowship, if awarded. If I need to withdraw from consideration at any point during the pendency of my application, I will notify my host and the Foundation immediately, to allow for the fair consideration of other candidates.

If awarded a Fellowship:

- I will devote my full working time, attention, and best efforts to the Fellowship. I will be employed full-time by my host organization over the Fellowship term, and in connection with my employment with my host organization, I will be required to verify my identity and eligibility to work in the United States, as required by applicable law.

- I will meet the Foundation's expectations of its Fellows, including the following:
  - maintain high professional and ethical standards, including honesty in my professional dealings and treating everyone with respect and consistent with shared human dignity;
  - attend the annual Fellowship Symposium each of the next three Springs;
  - promptly communicate with the Foundation regarding the Fellowship;
  - have a check-in by the one-year point in the Fellowship; and
  - at the conclusion of the Fellowship, provide an impact summary and confidential evaluation, as well as future contact information and employment information, to the Foundation.

I acknowledge that I have read and understood this Fellowship Applicant Certification and agree to comply fully with its terms. I also understand that failure to comply with any term of this certification shall be considered sufficient cause for denial of receipt of a Fellowship or the rescission or termination of a Fellowship.

_____

APPLICANT'S SIGNATURE DATE

Law schools and host organizations occasionally request from the Foundation updates about or feedback on their applicants. If you initial below to OPT OUT, the Foundation will not share updates or feedback about your application with your school or host organization. Doing so will have no bearing on the selection process. _____