



## United States Attorney's Office District of South Dakota Summer Law Camp Application

Date:	
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### Applicant Information

Name (First, Middle, Last)	
Address	
City, State/Zip	
Home Phone	
Cell Phone	
Email	
Grade (fall 24-25 semester)	

### Guardian Information

Name	
Address	
City, State/Zip	
Home Phone	
Cell Phone	
Email	
Relationship to Applicant	

How did you hear about this Summer Law Camp? Why are you interested in the Summer Law Camp with the U.S. Attorney's Office? What makes you a good applicant? Please use the space below to provide your responses.

Please download and submit your completed application to:  
[USASD.SummerLawCamp@usdoj.gov](mailto:USASD.SummerLawCamp@usdoj.gov)