**INSTRUCTIONS:** *Please complete in full and return with a current resume*. The information requested in this form is required for provision of professional liability insurance coverage by the Center. For attorneys, your information on license status will be confirmed and periodically reviewed based on your State Bar of California record.

**We are currently accepting volunteers who meet one or more of the following criteria. Check the one that applies to you:**

Attorney  Law Student/Law School Graduate  Certified Paralegal

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name:  Enter Full Name | | | | | |
| Name of Firm/Business:  Enter Firm/Business Name | | | | | |
| Mailing Address ( home  business):  Enter Address | | | | | |
| City:  Enter City | | State:  Enter State | | | Zip:  Enter Zip |
| Email:  Click here to enter e-mail. | | | | | |
| Work Phone:  Enter Work Number | Home Phone:  Enter Home Number | | | Cell Phone:  Enter Cell Number | |
| Emergency Contact Name:  Emergency Contact Full Name | | | Emergency Contact Phone Number:  Enter Emergency Contact Telephone Number. | | |
| Other Languages Spoken:  Enter Other Languages Spoken | | | | | |

**Professional Status**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| CA Licensed Attorney | CA Bar Number:  Enter Bar Number | Law School Attended: Enter School Name | | Year Admitted:  Enter Year |
| Out of State Attorney | Bar Number:  Enter Bar Number | Law School Attended:  Enter School Name | | Year Admitted:  Enter Year |
| Certified Paralegal | College/Program Attended:  Enter College/Program Name | | Year Graduated:  Enter Year | |
| Law Student/ Graduate | Law School Attended:  Law School Name | | Year Graduated:  Enter Year | |

|  |  |
| --- | --- |
| Current Employer:  Enter Current Employer | Number of Years Employed:  Enter Number of Years Employed |
| Current Occupation:  Enter Current Occupation | Employment Status:  Employment Status |

**Family Law Experience**

|  |
| --- |
| None  Certified family law specialist  Current or previous primary family law practice  Volunteer or Intern/Externship Experience **(specify):** Click here to enter text. |
| Number of Years in family law: from Beginning Year to Ending Year |

**Check all other legal areas in which you have prior work and/or volunteer experience, and specify years and type of experience:**

Immigration:Click here to enter text.

Criminal Prosecution or Defense: Click here to enter text.

Civil Litigation:Click here to enter text.

Juvenile Dependency: Click here to enter text.

Labor and Employment: Click here to enter text.

Workers’ Compensation: Click here to enter text.

Personal Injury:Click here to enter text.

Real Estate: Click here to enter text.

Education: Click here to enter text.

Health Care: Click here to enter text.

Wills/Trusts/Estates: Click here to enter text.

Bankruptcy: Click here to enter text.

Elder Law: Click here to enter text.

Corporate/Business:Click here to enter text.

**Volunteer Program Preferences**

*(Please check one or more)*

|  |  |  |
| --- | --- | --- |
| **COAS**  (Client Orientation & Assessment System) | **Pro Per**  (Individual Appointments) | **Pro Bono Panel** |
| Volunteers interview and provide initial advice to prospective clients of the Center in consultation with staff. | Volunteers prepare pleadings, declarations and a variety of other assistance and instruction to help individuals prepare for court on their own. May include individual advice, meetings, and interviews with clients as well as preparation of pleadings and documents without the client present. | Volunteers provide in court representation and /or settlement assistance. Strong preference for lawyers with family law experience; participation within the sole discretion of the Center. |

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| --- |
| **What are your personal goals in volunteering for the Harriett Buhai Center? Please rank on a scale from 1-5 where 1 is not important, and 5 is extremely important. (There are no wrong answers – these questions are designed to help us give you the best volunteer experience possible.)** |

Below are some activities and/or areas of knowledge that are relevant to volunteers’ work at the center. For each activity and/or area of knowledge, please indicate 1) whether you have specific professional experience or training; and 2) whether you are interested in performing or learning to perform this type of work.

We will make efforts to match you with work that reflects your experience, and interest level to the extent that our caseload and scheduling permits.

|  |  |  |
| --- | --- | --- |
| **Activity:** | **Describe any prior experience in this type of work:** | **Are you interested in this type of work?** |
| Client interviewing and counseling | Click here to enter text. | Click here to enter text. |
| Preparation of family law pleadings/declarations | Click here to enter text. | Click here to enter text. |
| Legal research, analysis and writing | Click here to enter text. | Click here to enter text. |
| Analyzing financial information | Click here to enter text. | Click here to enter text. |
| Administrative support (e.g. file maintenance/organization) | Click here to enter text. | Click here to enter text. |

|  |
| --- |
| **Is there anything else you would like us to know about your background, experience or goals?** Click here to enter text. |

|  |
| --- |
| **Do you have any criminal convictions other than minor traffic offenses? If yes, please specify (affirmative answer to this question will be evaluated on a case by case basis):**  Click here to enter text. |

**Availability**

**We rely on volunteers to complete legal work for our clients and therefore it is expected that volunteers will be able to stay for the duration of their scheduled appointment, which will begin at 9:30, 10:00 or 10:30 a.m. and may last from 4 to 6 hours.**

I agree to abide by the policies and procedures for cases developed by the Center’s Board of Directors and Staff. I agree to handle all cases in a highly professional and completely confidential manner. I agree that all information I have provided to the Center is true and correct and will be updated as it changes.

**Please sign and date below:**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: **4/28/2020**

***Please note: acceptance of applicants to volunteer remains at the discretion of the Center.***