

**UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF ALABAMA**

**FEDERAL CIVIL PRO BONO PANEL VOLUNTEER ATTORNEY APPLICATION**

Firm Contact (for law firm volunteers): \_\_\_\_\_

Attorney's Name (for individual volunteers): \_\_\_\_\_

Firm's Name: \_\_\_\_\_

Office Street Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ ☐ Home ☐ Cell ☐ Work

Alternate Telephone #: \_\_\_\_\_ ☐ Home ☐ Cell ☐ Work

Date licensed to practice law: \_\_\_\_\_

Date admitted to practice before this court: \_\_\_\_\_

Languages spoken other than English: \_\_\_\_\_ ☐ Fluent? ☐ Conversant?

**Please check the kinds and number of cases per year you agree to accept:**

<input type="checkbox"/> Employment Discrimination # _____	<input type="checkbox"/> Labor # _____	<input type="checkbox"/> Prisoner Civil Rights # _____	<input type="checkbox"/> Other Civil Rights # _____	<input type="checkbox"/> Immigration/Deportation # _____
<input type="checkbox"/> Personal Injury # _____	<input type="checkbox"/> Real Property # _____	<input type="checkbox"/> Contract # _____	<input type="checkbox"/> Forfeiture/Penalty # _____	<input type="checkbox"/> Intellectual Property Rights # _____
<input type="checkbox"/> Federal Tax Suits # _____	<input type="checkbox"/> Social Security # _____	<input type="checkbox"/> Banking and Commerce # _____	<input type="checkbox"/> Consumer Credit & Financial Services # _____	<input type="checkbox"/> Employee Benefits # _____
<input type="checkbox"/> Agricultural Acts # _____	<input type="checkbox"/> Environmental # _____	<input type="checkbox"/> Freedom of Info. Act # _____	<input type="checkbox"/> Constitutional Rights # _____	<input type="checkbox"/> Other Describe: _____ # _____

**Please indicate the Division(s) in which you are willing to accept cases:**

<input type="checkbox"/> Southern	<input type="checkbox"/> Northeastern/Northwestern	<input type="checkbox"/> Eastern/Middle	<input type="checkbox"/> Jasper/Western
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Are you willing to accept appointments for limited scope representation? ☐ Yes ☐ No

Are you willing to serve as a mentor to supervise a younger or less experienced attorney? ☐ Yes ☐ No

**I have received and reviewed the Plan for Pro Bono Counsel for Unrepresented Indigent Parties in Civil Cases. I agree to abide by the conditions of appointment of the Plan**

**Signature of Attorney:** \_\_\_\_\_ **Date:** \_\_\_\_\_