

**CIVIL PRO BONO PANEL VOLUNTEER FORM**

*(please print, complete, sign and fax or mail)*

\_\_\_\_\_  
**Attorney's Name** **Board of Prof. Resp. #**

\_\_\_\_\_  
**Office Address**

\_\_\_\_\_  
**City/State** **Zip** **Phone#** ( ) \_\_\_\_\_

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

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

Please check the kinds of cases you agree to accept:

- Employment Discrimination \_\_\_\_\_
- Prisoner Civil Rights \_\_\_\_\_
- Other Civil Rights \_\_\_\_\_
- Social Security \_\_\_\_\_
- Other (Miscellaneous) \_\_\_\_\_

I am willing to serve as a mentor to supervise a younger or less experienced attorney:

Yes \_\_\_\_\_ No \_\_\_\_\_

I have received and reviewed [Local Rule 83.2](#) and the Plan for Reimbursement of Expenses. I agree to abide by the conditions of appointment stated therein.

\_\_\_\_\_  
**Signature of Attorney** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**Date**