

**PRO BONO ATTORNEY INFORMATION FORM**  
LEGAL AID SERVICES OF OREGON

Name		Phone	
Firm & Address			
Email			
I am a member of the Oregon State Bar in good standing. My bar number is:			
I am fluent in the following languages other than English:			
I am and will continue to be covered by professional liability insurance.		Yes	No

*If you do not have professional liability coverage for your pro bono work referred through our office, it will be provided by Legal Aid Services of Oregon.*

**I would like to volunteer for the following project(s):**

	Expungement Clinic		OSB Debtor-Creditor Section Bankruptcy Clinic
	Domestic Violence Project		Senior Law Project
	Pro Se Assistance Project		Low Income Taxpayer Clinic
	Pro Se Assistance Project (Facilitation)		Virtual Family Law Project
	ProBonoOregon Listserv		Direct Referrals (See Below)

Attorneys are occasionally needed to accept **direct referral** cases or to **mentor** a less-experienced attorney on a case. If you are interested in accepting direct referral cases or mentoring an attorney, please choose from the areas listed below:

	I would like to take <b>direct referral</b> cases		I would like to be a <b>mentor</b> (please note how much experience you have)
	Bankruptcy		Housing, Landlord/Tenant
	Consumer		Public benefits, Social Security
	Elder law, probate, wills		Real Property
	Employment		Tax
	Family		Unemployment Compensation
	Foreclosure prevention		Other:

	I am willing to do home visits for disabled clients who cannot travel
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I will inform LASO if my OSB status changes or if I am convicted of any crime.

Date		Signature	
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**Please return this form to:**

**Heather Kemper  
Central Administrative Office  
520 SW Sixth Avenue, Suite 1130  
Portland, OR 97204**

**If you have any questions, contact Heather Kemper at 503-471-1124 or [heather.kemper@lasoregon.org](mailto:heather.kemper@lasoregon.org)**

*Thank you for your generous support of our pro bono programs!*