

ACTIVE MEMBERSHIP APPLICATION

For Membership Year 2007

EL PASO PARALEGAL ASSOCIATION, INC.

Please attach the appropriate proof of education, qualifications and attorney attestation.

NAME: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP : _____

HOME NUMBER _____

EMPLOYER: _____

AREA OF LAW: _____

OFFICE ADDRESS: _____

CITY: _____ TATE: _____ ZIP: _____

OFFICE PHONE: _____ FAX: _____

E-MAIL: _____

PREFERRED MAILING ADDRESS: BUSINESS _____ HOME _____

*******MEMBERSHIP PERIOD IS JANUARY TO DECEMBER *******

ACTIVE MEMBERSHIP DUES: \$40.00 (\$25.00 fee will be assessed on returned checks)

Please make check payable to EPPA and return to the address listed below:

Tammy Diaz
Vice-President of Membership
Volk, Poulos & Coates, LLP
5915 Silver Springs Bldg. 1
El Paso, Texas 79912
915-760-5151

EL PASO PARALEGAL ASSOCIATION, INC.
An Affiliate of the National Association of Legal Assistants

ATTORNEY EMPLOYER ATTESTATION FORM

To be completed when the applicant meets the following criteria for **Active-Membership**:

1. Has successfully completed a voluntary specialty certification examination administered by the Texas Board of Legal Specialization and currently working under the direct supervision of a duly licensed attorney (see section 4.02 for the definition of paralegal); or
2. Has successfully completed the voluntary certification examination given by the National Association of Legal Assistants, Inc., plus one year of employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
3. Has a bachelor's or higher degree in any field plus one year of employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
4. Has successfully completed ABA approved program of education and training for paralegals plus one year employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
5. Has successfully completed a paralegal program consisting of a minimum of (60) semester hours (or equivalent quarter hours) of which fifteen (15) hours are substantive legal courses plus one year of employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
6. Has successfully completed a paralegal program consisting of a minimum of fifteen (15) hours of substantive legal courses plus two years of employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
7. Has a minimum of three (3) years of employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
8. Is self-employed on a freelance basis, so long as the applicant is involved in the generation of substantive legal work that otherwise would be performed by an attorney. The applicant must be performing such work under the ultimate direction and supervision of a duly licensed attorney plus have a minimum of five (5) years employment experience as a paralegal.

ATTESTATION

I hereby attest that _____ is employed by me and is recognized as a paralegal as defined below. I further attest that applicant has been employed by me since _____ / _____ (month/year) and is recommended for active membership in the El Paso Paralegal Association, Inc.

Attorney Signature

Bar Number: _____

Firm name, address and telephone number:

4.02 Definition of Paralegal: A legal assistant or paralegal is a person qualified by education, training or work experience who is employed or retained by a lawyer, law office, corporation, governmental agency or other entity who performs specifically delegated substantive legal work, for which the lawyer is responsible. (Adopted by the ABA in 1997)

NOTE: Please copy this page if you need multiple attestations to cover the time periods as defined above.

INSTRUCTIONS

- * All applicants meeting the qualifications of “1” or “2” must submit proof of certification.
- * All applicants meeting the qualifications of “3” must submit proof of completion of a bachelor or higher degree.
- * All applicants meeting the qualifications of “4,” or “5,” or “6” must submit a copy of their transcripts or their degree/certificate and school curriculum showing all courses covered.
- * All applicants meeting the qualifications of “8” must submit a current resume.
- * All applicants must submit an employer attestation signed by a supervising attorney. If applying under section 8, an attestation signed by an attorney for whom such paralegal currently performs, or has performed within the previous three month period, paralegal services on a contract basis.

DECLARATION

I, (print or type applicant name) _____, hereby declare my interest in and sympathy with the purposes of the El Paso Paralegal Association, Inc., and hereby promise to comply with the Articles of Incorporation, and the Bylaws. I promise to pay the dues for Active members. I understand this application is subject to formal approval by the Membership Committee of the El Paso Paralegal Association, Inc.

Date: _____
Signature of applicant

NOTICE

UPON APPROVAL OF YOUR APPLICATION, YOU WILL RECEIVE A COPY OF EPPA’S BYLAWS. PLEASE CONTACT US IF YOU WISH TO REVIEW A COPY OF THE BYLAWS BEFORE APPROVAL OF YOUR APPLICATION.

ASSOCIATE MEMBERSHIP APPLICATION

For Membership Year 2007

EL PASO PARALEGAL ASSOCIATION, INC.

Please attach the appropriate proof of education, qualifications and attorney attestation.

NAME: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME NUMBER _____

EMPLOYER: _____

AREA OF LAW: _____

OFFICE ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

OFFICE PHONE: _____

FAX NUMBER: _____

E-MAIL: _____

PREFERRED MAILING ADDRESS: BUSINESS _____ HOME _____

*******MEMBERSHIP PERIOD IS JANUARY TO DECEMBER *******

ASSOCIATE MEMBERSHIP DUES: \$40.00 (\$25.00 fee will be assessed on returned checks)

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760-5151

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ATTORNEY EMPLOYER ATTESTATION FORM

To be completed when the applicant meets the following criteria for **Associate Membership**:

1. Be presently employed as a paralegal under the direct supervision of a duly licensed attorney, but has not yet satisfied the educational requirements of employment experience as a paralegal under sections 1 thru 8 (Qualifications for Active Membership); but otherwise satisfying the criteria for active membership; or
2. Be presently employed as a coordinator or supervisor of a paralegal program within a law firm, company or agency, and previously having met the criteria set forth under sections 1 thru 8 (Qualifications for Active Membership); or
3. Be presently employed by a company or agency related to the legal profession but is not under the direct supervision of a duly licensed attorney; but otherwise satisfying certification or educational requirements for active membership; or
4. Possess a minimum of 1 year of experience as a paralegal, be currently unemployed, without satisfying the requirements of employment as a paralegal under sections 1 thru 8 (Qualifications for Active Membership).

All applications meeting the qualifications of Section 4 (above) must submit a current resume with his/her application, shall be a member for a period of one year, and must be employed at the time of membership renewal.

ATTESTATION

I hereby attest that _____ is employed by me and is recognized as a paralegal as defined below. I further attest that applicant has been employed by me since _____ / _____ (month/year) and is recommended for membership in the El Paso Paralegal Association, Inc.

Attorney Signature

Bar Number: _____

Firm name, address and telephone number:

4.02 Definition of Paralegal: A legal assistant or paralegal is a person qualified by education, training or work experience who is employed or retained by a lawyer, law office, corporation, governmental agency or other entity who performs specifically delegated substantive legal work, for which the lawyer is responsible. (Adopted by the ABA in 1997)

DECLARATION

I, (print or type applicant name) _____, hereby declare my interest in and sympathy with the purposes of the El Paso Paralegal Association, Inc., and hereby promise to adhere to the Articles of Incorporation and the Bylaws. I understand that I will remain an Associate Member until I meet the qualifications of Active Membership at which time I may submit application for Active Membership. I understand that as an Associate Member I shall only be entitled to vote on such matters that are submitted by the Board of Directors to Associate Members. I promise to pay the dues for Associate Members. I understand this application is subject to formal approval by the Membership Committee of the El Paso Paralegal Association, Inc.

Signature of applicant

Date

NOTICE

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STUDENT MEMBERSHIP APPLICATION

For Membership Year 2007

EL PASO PARALEGAL ASSOCIATION, INC.

Please attach the appropriate proof of education, qualifications and attestation.

NAME: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME NUMBER _____

E-MAIL: _____

SCHOOL ATTENDING: _____

EXPECTED DATE OF GRADUATION: _____

LENGTH OF PARALEGAL TRAINING PROGRAM: _____

HOURS/SEMESTERS COMPLETED: _____

*******MEMBERSHIP PERIOD IS JANUARY TO DECEMBER *******

STUDENT MEMBERSHIP DUES: \$15.00 (\$25.00 fee will be assessed on returned checks)

Please make check payable to EPPA and return to the address listed below:

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Vice-President of Membership
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760-5151

EL PASO PARALEGAL ASSOCIATION, INC.
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ATTESTATION FORM

To be completed when the applicant meets the following criteria for **Student Membership**:

1. Be currently enrolled in an ABA approved program of education and training for paralegals; or
2. Be currently enrolled in a paralegal program that consists of a minimum of sixty (60) semester hours (or equivalent quarter hours) of which fifteen (15) are substantive legal courses; or
3. Be currently enrolled in a paralegal program that consists of fifteen (15) semester hours of substantive legal courses.

DECLARATION

I, (print or type applicant name) _____, hereby declare my interest in and sympathy with the purposes of the El Paso Paralegal Association, Inc., and hereby promise to adhere to the Articles of Incorporation and the Bylaws. I understand that I will remain a Student Member until I meet the qualifications of Associate or Active Membership at which time I may submit application for same. I promise to pay the dues for Student Members. I understand this application is subject to formal approval by the Membership Committee of the El Paso Paralegal Association, Inc.

Signature of applicant

Date

TO BE COMPLETED BY THE PARALEGAL PROGRAM COORDINATOR OR INSTRUCTOR:

I HEREBY ATTEST THAT _____

IS A STUDENT AND IS CURRENTLY ENROLLED IN THE PARALEGAL PROGRAM AT

_____ (name of school).

SIGNATURE: _____

TITLE: _____

DATE: _____

ACTIVE MEMBERSHIP RENEWAL APPLICATION
FOR MEMBERSHIP YEAR 2007
EL PASO PARALEGAL ASSOCIATION, INC.

NAME: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME TELEPHONE: _____

EMPLOYER: _____ AREA OF LAW _____

OFFICE ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

WORK TELEPHONE: _____ FAX NUMBER: _____

E-MAIL: _____

PREFERRED MAILING ADDRESS: HOME: _____ OFFICE: _____

*******MEMBERSHIP PERIOD IS JANUARY TO DECEMBER*******

RENEWAL MEMBERSHIP FEE: \$40.00 (\$25.00 fee will be assessed on returned checks)

Please make check payable to EPPA and return to the address listed below:

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El Paso, Texas 79912
760-5151

EL PASO PARALEGAL ASSOCIATION, INC.
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ATTORNEY-EMPLOYER ATTESTATION FORM

To be completed when the applicant:

1. Has successfully completed a voluntary specialty certification examination administered by the Texas Board of Legal Specialization and currently working under the direct supervision of a duly licensed attorney (see section 4.02 for the definition of paralegal); or
2. Has successfully completed the voluntary certification examination given by the National Association of Legal Assistants, Inc., plus one year of employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
3. Has a bachelor's or higher degree in any field plus one year of employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
4. Has successfully completed ABA approved program of education and training for paralegals plus one year employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
5. Has successfully completed a paralegal program consisting of a minimum of (60) semester hours (or equivalent quarter hours) of which fifteen (15) hours are substantive legal courses plus one year of employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
6. Has successfully completed a paralegal program consisting of a minimum of fifteen (15) hours of substantive legal courses plus two years of employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
7. Has a minimum of three (3) years of employment experience as a paralegal currently working under the direct supervision of a duly licensed attorney; or
8. Is self-employed on a freelance basis, so long as the applicant is involved in the generation of substantive legal work that otherwise would be performed by an attorney. The applicant must be performing such work under the ultimate direction and supervision of a duly licensed attorney plus have a minimum of five (5) years employment experience as a paralegal.

ATTESTATION

I hereby attest that _____ is employed by me and is recognized as a paralegal as defined below. I further attest that applicant has been employed by me since _____ / _____ (month/year) and is recommended for active membership in the El Paso Paralegal Association, Inc.

Attorney Signature

Bar Number: _____

Firm name, address and telephone number:

4.02 Definition of Paralegal: A legal assistant or paralegal is a person qualified by education, training or work experience who is employed or retained by a lawyer, law office, corporation, governmental agency or other entity who performs specifically delegated substantive legal work, for which the lawyer is responsible. (Adopted by the ABA in 1997)

SUSTAINING MEMBERSHIP APPLICATION
FOR MEMBERSHIP YEAR 2007
EL PASO PARALEGAL ASSOCIATION, INC.
An Affiliate of the National Association of Legal Assistants

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: _____

E-MAIL: _____

As a Sustaining Member, I/we hereby declare our interest in and sympathy with the purposes of the El Paso Paralegal Association, Inc., and hereby pledge our support. I/we promise to pay the dues for Sustaining members. I/we understand this application is subject to formal approval by the Membership Committee of the El Paso Paralegal Association, Inc.

*****MEMBERSHIP PERIOD IS JANUARY TO DECEMBER*****

MEMBERSHIP FEE: \$60.00 (\$25.00 fee will be assessed on returned checks)

Please make check payable to EPPA and submit this form to the address listed below:

Tammy Diaz
Vice-President of Membership
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El Paso, Texas 79912
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