



Legal Assistance

Attorney Volunteer Application



**ATTORNEY VOLUNTEER ENROLLMENT FORM
CATHOLIC CHARITIES LEGAL ASSISTANCE (“CCLA”)**

Name: _____ Date: _____

How did you hear about the opportunity to volunteer with Catholic Charities Legal Assistance?

Are you presently affiliated in any way with Catholic Charities? YES NO

If yes, how are you affiliated? _____

I. CONTACT INFORMATION:

Home Address: _____ Work Address: _____

Do you prefer to receive CCLA mailings at (please circle one): HOME WORK

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email address: _____

How do you prefer we contact you (circle all that apply): HOME WORK
CELL EMAIL

II. PROFESSIONAL BACKGROUND:

Law school attended: _____ City, State: _____

Year licensed to practice law in Illinois? _____ ARDC#: _____

Are you licensed in any other jurisdictions (please list with year)? _____

Are you licensed in federal court (please list district and year)? _____

Are you currently practicing? YES NO If yes, what firm? _____

Area(s) of practice: _____

Do you maintain professional liability insurance that will cover your work with CCLA? YES NO
* Please let CCLA know if you need to be added to the malpractice insurance for the program

Have you ever had any disciplinary action taken against you in any state? YES NO

If yes, please explain: _____

III. LANGUAGES:

Do you speak a foreign language? YES NO If yes, what language(s)? _____
Do you consider yourself fluent? YES NO
Do you have the capability to handle a case for a client in that language? YES NO

IV. VOLUNTEER OPPORTUNITIES:

Please check the volunteer opportunities in which you are interested. This does not obligate you to any particular time commitment, but will simply guarantee that you will be notified as opportunities arise in the areas in which you are interested. If applicable, you will receive further information.

_____ **PRO BONO REPRESENTATION:** I am willing to represent clients referred from CCLA on a pro bono basis. **Please specify the practice areas in which you would like to accept cases on the Pro Bono Representation Opportunities form (next page).**

_____ **HOTLINE CALLS:** I am willing to answer/return hotline calls.

_____ **SEMINARS:** I am interested in being a speaker at an informational/educational seminar on a particular legal topic. Please specify topic(s): _____

_____ **MENTOR:** I am willing to act as a mentor for a new attorney handling a pro bono case (on behalf of CCLA) in the following area(s) of law: _____

_____ **ADVICE DESKS:** I am willing to work at CCLA's monthly legal advice desk at one (or more) of the following Evening Supper Programs for the homeless (please check):

_____ St. Vincent Center
721 N. LaSalle St.
Chicago, IL 60610
4:30 – 6 p.m.

_____ Catholic Charities Family Service Center
1717 Rand Road
Des Plaines, IL 60016
5:30 – 7 p.m.

_____ Casa Catalina, Iglesia Inmaculado Corazón de María
4513 S. Ashland
Chicago, IL 60609
5:30 – 7 p.m. (Requires Spanish Language Skills)

Please indicate how often you are available for the monthly supper legal advice desks:
_____ monthly _____ quarterly _____ semi-annually _____ other: _____

_____ **LEGAL RESEARCH:** I am willing to perform occasional legal research for CCLA.

V. PRO BONO REPRESENTATION OPPORTUNITIES:

The following pages list the areas for which we need pro bono volunteers, although it is not a comprehensive list. Please indicate in which areas* you would prefer to handle cases.

*Please note: Catholic Charities Legal Assistance requests that attorneys have experience in the areas of law for which they volunteer. CCLA does not provide support services or training in specific areas of law.

Please specify any limitations under the category you are checking, i.e. evictions, but only defense.

ALTERNATIVE DISPUTE RESOLUTION:

- Arbitration
- Mediation

BANKRUPTCY/DEBT MANAGEMENT:

- Bankruptcy - Chapter 7
- Bankruptcy - Chapter 13
- Collection
- Loans

CONSUMER:

- Credit Access
- Unfair Sales Practices

CONTRACTS:

- Preparation
- Review

CORPORATE:

- Dissolution
- Incorporation

CRIMINAL:

- Criminal Defense
- Criminal Record Expungement/Sealing

DCFS INVESTIGATION:

- All areas (Child Welfare, Foster Parent Litigation)

DRIVERS LICENSE:

- Obtaining

EDUCATION:

- Access
- Discrimination

EMPLOYMENT:

- Discrimination
- Unemployment Compensation
- Wage Claims
- Workers Compensation
- Wrongful Termination

FAMILY LAW:

- Adoption
- Child Support & Maintenance (separate from divorce)
- Custody – Post-decree
- Divorce
- Domestic Violence
- Legal Separation
- Parental Rights Termination
- Paternity

FINANCIAL ABUSE:

- Financial Abuse (on Elderly or Disabled Individuals)

GUARDIANSHIP:

- Disabled Adult
- Minor
- Senior Citizen

HOUSING:

- Discrimination
- Eviction
- Federally Subsidized Housing Rights
- Foreclosures
- Homeowner/Real Property
- Landlord/Tenant (general)
- Real Estate Closings

IDENTITY THEFT:

- Identity Theft

IMMIGRATION:

- Adjustment of Status (V.A.W.A.)
- Family Based Immigration/Naturalization
- Removal proceedings

INCOME TAX:

- Preparation
- Penalties
- Representation before the IRS

INTELLECTUAL PROPERTY:

- Copyright
- Trademark

NAME CHANGE:

- Name Change

PERSONAL INJURY:

- Defendant
- Plaintiff

PUBLIC BENEFITS:

- Food Stamps
- Medicaid
- Medicare
- Social Security
- SSDI
- SSI
- SSI Children
- TANF/Other State Welfare
- Veterans Benefits

PUBLIC UTILITIES:

- Billing
- Shut-off

WILLS AND ESTATES:

- Preparation – Any estate
- Preparation – Small Estate only
- Preparation – Trusts
- Probate

MISCELLANEOUS:

- Mental Health Law

OTHER AREAS IN WHICH YOU WILL ACCEPT CASES: _____

In what counties will you accept cases? COOK LAKE Other: _____

If Cook County only, will you accept cases in outlying suburbs, or only Chicago?

BOTH CHICAGO ONLY SUBURBS ONLY

VI. VOLUNTEER RECOGNITION:

CCLA may wish to recognize its volunteers on its website and other promotional materials by listing their names and/or firm's name. Please indicate below whether CCLA has your permission to do so:

Yes, CCLA may recognize my volunteer support on its website and other promotional materials.

No, CCLA may not recognize my volunteer support.

Signature: _____

Date: _____

QUESTIONS:

If you have any questions, you may contact us by:

Phone: 312-948-6821

E-mail: kcallahan@catholiccharities.net

Visit our Website: www.catholiccharities.net/ccla

Please return this Attorney Volunteer Enrollment Form along with the following required forms:

- 1) Background Check
- 2) Declarations
- 3) Confidentiality Agreement
- 4) Photo Release

Send completed forms to:

**Catholic Charities Legal Assistance
651 W. Lake St., Suite 403
Chicago, IL 60661**

THANK YOU!