

SIGNATURE

(To be completed by applicant with no formal training for paralegal/legal assistant)

Attorney-Employer Attestation

I hereby attest that _____ is employed by me and is recognized as a paralegal/legal assistant. He/she, under the supervision of a lawyer, is capable of the following services:

Applying knowledge of the law and legal procedure by drafting legal documents and researching certain areas of the law.

Preparing or editing legal documents for review by lawyers.

Selecting, compiling, and using legal material from such references as digests, treatises, or practice manuals.

The applicant has been employed by me as a paralegal/legal assistant for six (6) months or longer. The applicant's ethical and professional conduct are above reproach, and he/she is recommended for membership in the Central Illinois Paralegal Association.

Signature of Attorney-Employer:

Date:

MEMBERSHIP SUMS ARE DUE DECEMBER 31ST FOR THE UPCOMING CALENDAR YEAR

PRORATED DUES SCHEDULE (for new active members in 2018 only):

<u>Amount</u>	<u>Paid in Month</u>
\$50.00	January, February, March
\$40.00	April, May, June
\$30.00	July, August, September
\$20.00	October, November, December

At times, we may desire to publish your image and/or name in our Newsletter or on our website. Please read the following and sign indicating your preference. Please do not hesitate to contact any officer with questions or concerns.

I hereby grant the Central Illinois Paralegal Association ("CIPA") permission to use, reproduce, and publish my name, photograph or video image by incorporating them into the CIPA website or newsletter for informational or educational purposes.

Name: _____ Signature: _____

Date: _____

No, please do not publish my name, photograph, or video image on the CIPA website or in the Newsletter.

Name: _____ Signature: _____

Date: _____