



UNITED STATES DISTRICT COURT
District of Rhode Island

PRO BONO PANEL APPLICATION

Applicant Information

Full Name: _____
Last First M.I.

Firm: _____

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Bar Number _____ Date of First Bar Admission: _____

Jurisdictions Where Admitted: _____

Do you, or does your firm, maintain professional liability insurance? Yes No

Are there any disciplinary proceedings pending against you at this time? Yes No

Has your *pro hac vice* status ever been revoked by any court? Yes No

(Note: If you answered yes to any of the two previous questions, you must provide a full explanation as an attachment to this application.)

Experience

Are you fluent in one or more foreign language? Yes No

If yes, please specify: _____

Indicate any areas of civil practice expertise: _____

How many years of civil litigation experience do you have? _____

Briefly describe your civil litigation experience:

If your civil litigation experience has not been in the District of Rhode Island, please list your recent cases:

Case Number	Case Name	Court	Civil Practice Area	Disposition

Please describe any other relevant experience that qualifies you for appointment to the Civil Pro Bono Panel:

Mentorship Opportunities

Would you be willing to serve as a mentor to another panel attorney? Yes No

If the Court determines that you do not have the requisite amount of civil litigation experience, would you be willing to accept a pro bono appointment under the supervision of a mentor attorney? Yes No

If you are willing to accept appointment under the supervision of a mentor attorney, indicate if there is an experienced civil practitioner who is willing to be your mentor attorney*:

*Note: The prospective mentor attorney does not need to be a member of the Court's *Pro Bono* Panel.

Certification and Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____