



SHREVEPORT BAR ASSOCIATION

Legal Community Support Staff Committee

MEMBERSHIP APPLICATION

Name: _____ Date of Birth: _____

Employer: _____ Immediate Supervisor: _____

Work Address: _____

Home Address: _____

Mailing Address (if different): _____

Work Phone: _____ Home/Cell Phone: _____

Work E-Mail: _____ Personal E-mail: _____

Spouse's Name: _____

Highest Grade Completed: _____ Last School Attended: _____

Veteran [Yes] [No] I am currently serving in the Armed Services. Branch: _____

Areas of Specialty: _____

Please list current professional and business memberships: _____

CHECK ALL THAT APPLY:

Paralegal or other specialty program attended.
School from which certificate was obtained: _____

CP credential attained. If yes, date attained: _____

I reside in Caddo or Bossier Parish. Other Parish/County: _____

I am currently employed as a paralegal/legal assistant.

I am currently employed as _____

I have never been convicted of a felony.



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QUALIFICATIONS FOR MEMBERSHIP

A. ACTIVE/VOTING MEMBERS.

Active/voting membership is open to any individual who meets at least one of the following requirements:

1. Any individual who has a minimum of one (1) year of paralegal/legal assistant experience under the supervision of a licensed attorney, who attests that such person is qualified.
2. Any individual who has successfully completed a curriculum of training as a paralegal or one who is certified by a university, college, junior college or other approved school as having successfully completed a full course of studies prescribed for training as a paralegal.
3. Any individual who has successfully completed the Certified Paralegal (CP) examination administered by the National Association of Legal Assistants, Inc.
4. Any individual currently employed in the legal field or who has worked in the legal field for at least three (3) years.

B. STUDENT MEMBERS.

Student membership is open to any individual who meets at least one (1) of the following qualifications:

1. Any individual who is a student in good standing in an approved University, college, or junior college or other approved school pursuing a course of legal studies.
2. Not currently employed as a paralegal/legal assistant.



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COMMITTEE DUES

First year's dues must accompany this application form. If joining in the last quarter of the current year (October through December), membership is valid for 15 months.

Employers who pay for four (4) of their employees' memberships are entitled to one (1) additional membership at no cost.

ANNUAL DUES SCHEDULE (please check type of membership)

ACTIVE/VOTING MEMBERSHIP - Open to all members in good standing. This type of membership includes full voting privileges. These members may serve on the Board of the Shreveport Bar Association Legal Community Support Staff Committee.

STUDENT MEMBERSHIP - Members who are enrolled in paralegal or other formal higher education courses. Student members do not have voting privileges.

ACTIVE MEMBERSHIP RATE [] \$50

STUDENT MEMBERHIP RATE [] \$25

LAW FIRM/EMPLOYER DISCOUNT [] *\$200 - see explanation below

TOTAL DUES \$_____

*Law firms or other employers who pay for memberships of their employees are entitled to a \$50 discount for five (5) members, i.e., pay for four (4) members and the fifth membership is free. All applications must be turned in at the same time.

Areas of Interest/Willingness to Serve:

[] Education [] Membership

[] Job Bank [] Social Media/Publicity

[] Social



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All persons applying for regular membership under Section A (see "Qualifications") must submit this attestation with application.

ATTORNEY/EMPLOYER ATTESTATION

I hereby attest that _____ is or has been employed by me, and meets the qualifications to perform the duties of a paralegal or legal assistant. I further attest that this applicant has been or was employed by me as a paralegal/legal assistant for a period of _____ years and _____ months; that the applicant's ethical and professional conduct are above reproach; and that the applicant is recommended for membership in the Shreveport Bar Association Legal Community Support Staff Committee.

Date

Signature of Attorney/Employer

Name of Attorney/Employer: _____

Name of Firm/Company: _____

Address: _____

Telephone No.: _____ E-mail: _____



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All persons applying for student membership under Section B (see "Qualifications") must submit the following attestation with application:

ATTESTATION

I hereby attest that _____ is a student at _____ in the _____. I further attest that the applicant's ethical and professional conduct are above reproach; and that the applicant is recommended for student membership in the Shreveport Bar Association Legal Community Support Staff Committee.

Date

Signature of Dean/Administrator

Student Name: _____

University: _____

Address: _____

Telephone No.: _____ E-mail: _____