

A. Attorney:

## APPLICATION FOR CLE CREDIT FOR PRO BONO REPRESENTATION

- 1. The lawyer who performed the representation must complete Part I of this form, and then provide the original to the assigning court, program, entity, or law school.
- 2. The assigning court, program, entity or law school must complete Part II of this form, and then submit the original to the MCLE Department at the following address:

LSBA MCLE Department 601 St. Charles Ave. New Orleans, LA 70130-3404

Form 7 Rev. 10/2018

## PART I PRO BONO REPRESENTATION

**Regulation** / **Rule 3.21.** Credit may also be earned through providing uncompensated pro bono legal representation to an indigent or near-indigent client or clients. To be eligible for credit, the matter must have been assigned to the Member by a court, a bar association, or a legal services or pro bono organization that has as its primary purpose the furnishing of such pro bono legal services and that has filed a statement with the Louisiana State Bar Association MCLE Department. A Member providing such pro bono legal representation shall receive one (1) hour of CLE credit for each five (5) hours of pro bono representation, up to a maximum of three (3) hours of CLE credit for each calendar year.

		Se Number: Confidential Client Information)					
	Assigning	Organization:					
В.	Type of R	epresentation Provided:					
		Consumer		Economic Assistance		Education	
		Employment		Expungement		Family Law	
		Health		Housing		Immigration/Refugee	
		Individual Rights		Juvenile		Seniors	
		Social Security		Wills or Probate		Other	
Date range of representation:  Number of Hours of Pro Bono legal representation Number of CLE credit hours claimed:							
I he	ereby affirm	that I have performed the	abo	ove stated number of hou	rs o	f pro bono legal services.	
Signature of Attorney			Date		Bar Roll Number		

See Part II for verification by assigning authority.

This must be completed to qualify for CLE credit.

## **PART II**

## **VERIFICATION BY ASSIGNING ORGANIZATION**

The assigning organization's representative *must* verify the information provided by the attorney in Part I.

A.	nformation Regarding Assigning Party:						
	Name of Organization (judge, court,						
	etc.):						
	Name and title of person completing this form:						
В.	. Confirmation of Assignment: Did your organization assign the above listed matter to the reporting attorne for pro bono legal services?						
	□ Yes □ No						
C.	. Determination of Financial Eligibility: Prior to assigning the matter to the reporting attorney, did your organization determine that the client was eligible for pro bono legal services?						
	□ Yes □ No						
D.	Verification of Legal Services Performed: Has the attorney provided the legal services assigned?						
	□ Yes □ No						
	I hereby certify that the above information concerning pro bono services is correct.						
	Authorized Signature Date						
	Print Name						

For questions regarding the completion of this application form or pertaining to any of the MCLE requirements in Louisiana, please contact the MCLE Department toll free: (800) 421-5722; in New Orleans (504) 566-1600; via e-mail: mcle@lsba.org; or access our website: www.lsba.org/mcle