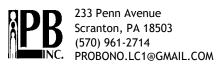
## LACKAWANNA PRO BONO, INC.



*Executive Director* Sylvia H. Hahn, Esq.

## PRO BONO VOLUNTEER ENROLLMENT FORM

Volunteer Name:				
<u>Firm</u> :				
Street Address:	City, State, Zip:			
Phone #:	<b>Fax #</b> :			
E-mail address: (If you would like to be contacted by e-mail)				
Main Practice Concentration(s):				
Other Areas of Interest: (e.g., children, elderly, homeless, mentally ill)				
Foreign Language Proficiency:				

**Types of Cases**: Please indicate with a "1" all types of matters which you are willing to handle, a "2" all types of matters which you would be willing to handle if Lackawanna Pro Bono arranged to provide training and/or a mentor in that area, and a "3" all matters in which you would like to serve as a mentor, trainer, or supervisor.

	Protection from Abuse (Plaintiff)		Consumer	
	Protection from Abuse (Defendant)		Driver's License Suspension	
	Child Custody/Visitation		Social Security/SSI	
	Child/Spousal Support		Unemployment Compensation	
	Separation Advice		Uninsured Tort Defense	
	Divorce		Wills/Estates	
	Landlord-Tenant		Education Law	
	Debtor/Creditor Problems		Pardon Project	
	Sheriff's Sale		BRIEF SERVICE: Family Law Help Desk	
	Mortgage Foreclosure		BRIEF SERVICE: Elder Law Clinic	
	Property Tax		Other:	
Comments:				

. . . . . . . .

Date: \_\_\_\_\_

Signature: \_\_\_\_\_