



AMERICAN BAR ASSOCIATION
321 N. Clark
CHICAGO, ILLINOIS 60654

AUTHORIZATION TO USE
AMERICAN BAR ASSOCIATION
LRIS LOGO AND SLOGAN

INSTRUCTIONS: The following are instructions to facilitate the completion of this application.

- Answer all the questions on the application completely. *Please type or print.*
- Complete the application checklist provided with the application.
- All document submitted with the application must be legible originals, with each page marked clearly.
- All application forms must be accompanied by a check or money order in the amount of **\$50** made payable to "**The American Bar Association.**"
- Approximately four to six weeks will be needed to process and review the application.
- Organizations completing the application must submit their by-laws, rules of operation, and tax status papers with the application.
- Copies of the **AMERICAN BAR ASSOCIATION'S LRIS MODEL RULES AND SUMMARY GOVERNING LAWYER REFERRAL AND INFORMATION SERVICES** are enclosed. Applicants are advised to review these carefully before beginning the application process.
- All references in application refer to these LRIS Model rules and summary.
- Your application will be reviewed for completeness, accuracy and compliance with LRIS Model Rules. Incomplete applications will be returned. Complete applications will be reviewed for approval or denial.
- The application is available electronically. If you want to complete the application using Microsoft Word call our office and we will send it to you via email. Be sure to print a hard copy of your application and return to us with the attachments.
- **Applicants are responsible for showing compliance with the LRIS Model Rules to the satisfaction of the AMERICAN BAR ASSOCIATION.**

For assistance, call or write: Jane Nosbisch
AMERICAN BAR ASSOCIATION
321 N. Clark
Chicago, Illinois 60654
Phone: (312)988-5754
Fax: (312)988-5483

ABA LOGO AND SLOGAN CHECKLIST Please check your completed application against this checklist for a complete application. Submit the checklist on top of your completed application.

ENCLOSURES REQUIRED OF ALL APPLICANTS:

- Completed application with original signature.
- Application fee (check or money order in the amount of \$50) made payable to "THE AMERICAN BAR ASSOCIATION"
- (Articles of Incorporation and By-laws) Attachment 1
- (Ownership Interest) Attachment 2
- (Statement of Qualification Requirement for Membership on Each Experience Panel Maintained by the Service) Attachment 3
- (Fee Schedule) Attachment 4
- (Copy of Application for a Lawyer to participate in the service) Attachment 5
- (Copy of Client Survey) Attachment 6

APPLICANTS ARE RESPONSIBLE FOR SHOWING FULL COMPLIANCE WITH ALL OF THE MINIMUM STANDARDS TO THE SATISFACTION OF THE AMERICAN BAR ASSOCIATION PURSUANT TO THE ABA GUIDELINES FOR APPROVAL OF LAWYER REFERRAL ORGANIZATIONS.

GENERAL INFORMATION

Name of lawyer referral service: Telephone Number:

Address: Fax Number:

Name of sponsoring organization: Telephone Number:

Address: Fax Number:

Name of operator/owner: Telephone Number:

Address: Fax Number:

Contact person, if different from operator/owner:

Contact email address:

Contact person, if different from operator/owner:

Geographical area(s) served:

DEFINITION OF A LAWYER REFERRAL SERVICE

1. Staff Description:

- Name of Director:
- Director's Position is: Full-time Part-time Other (describe)
- Number of Support Staff:
- Give Job Title(s) and indicate if the position(s) is Full-time or Part-time:

DEFINITION OF A LAWYER REFERRAL SERVICE (RULE II)

2. Describe how the referral service provides information to the public about lawyers, about the availability of legal services and when and where to seek legal advice, and how the service refers members of the public to lawyers willing and able to render legal services at an affordable price.

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AUTHORITY TO ESTABLISH AND OPERATE A SERVICE (RULE V)

3. Attach a check or money order made payable to: "THE AMERICAN BAR ASSOCIATION" for \$50 as payment for this application.

4. Ownership of a lawyer referral service

a. This service is owned and operated by a: Not For-Profit entity For-Profit entity

Name of Entity:

5. If owned and operated by a Not For-Profit entity, is it a: Bar association Legal services program
 Community organization (describe)
 Other (describe)

6. If owned and operated by a For-Profit entity, is it a: Corporation Partnership Sole proprietorship
 Other (describe)

7. If owned and operated by a Not For-Profit entity, attach the Articles of Incorporation and By-laws (Attachment 1):

8. If the service is owned and operated by a For-Profit entity, provide the following for each individual or organization with any kind of ownership interest, regardless of how that interest is held use separate sheet (Attachment 2) to provide this information.

- a. Name of ownership entity
- b. Address and telephone number
- c. Whether he/she is an active member of the Bar
- d. Whether he/she receives referrals from the service
- e. The percentage of referrals he/she receives from the service
- f. The percentage of ownership interest he/she has in the service

SAMPLE OF CLIENT SATISFACTION (RULE VII)

9. Describe in detail the procedures developed to evaluate client satisfaction with the service (Attachment 6):

ELIGIBILITY AND APPROVAL OF PANEL ATTORNEYS (RULE V)

10. Is panel membership open to all licensed attorneys in the area served by the service? YES NO

11. Does the service require panel members to be covered by errors and omissions insurance or provide proof of financial responsibility? YES NO

12. If yes, describe how the service verifies coverage or proof of financial responsibility and amount of coverage:

13. Describe the procedures established by the service to admit, reject, or suspend an attorney from panel membership:

ORGANIZATION OF PANELS (RULE V)

14. Has the service established subject matter Panel(s)? YES NO

15. List the subject matter panels maintained by the service and attach a statement of qualification requirements for membership on subject matter panels with this application (Attachment 3):

OPERATING FEES (RULE V)

16. List the following (if applicable).

- a. Membership or participation fee paid by Attorneys to participate in each panel.
- b. Fees charged Attorneys to participate on each panel.
- c. Forwarding fee or percentage fee (indicates amount or percentage amount to be returned to the service):
- d. Referral fees (consultation fee) charged to clients:
- e. Other fees: Give amount and describe.

17. Describe how the service assures that fees or the combination of fees charged to clients, panel members, or both, do not conflict with statutory or other legal provisions or increase the cost of legal services to the client.

18. The undersigned certifies under penalty of perjury that the above information is true and correct.

The service is a: For-Profit service Not For-Profit service

Owner/operator or director/administrator signature **X**..... Date

Printed name of individual above Phone Number:

Street address

City, state, zip code