



A Project of  
Legal Services for New York City

## Bankruptcy *Pro Bono* Panel Registration Form

### Attorney Instructor in a Law School Clinical Program

Law School: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ ABA Accredited? Yes No

Name of Clinical Program/Class: \_\_\_\_\_

\_\_\_\_\_

Program's Website Address: \_\_\_\_\_

Attorney Instructor: \_\_\_\_\_

Attorney Instructor's Address: \_\_\_\_\_

\_\_\_\_\_

Attorney Instructor's Phone and Fax Numbers: \_\_\_\_\_

Attorney Instructor's Email address: \_\_\_\_\_

Attorney Instructor's Years admitted to practice: \_\_\_\_\_

Attorney Instructor's Principal Practice Areas: \_\_\_\_\_

\_\_\_\_\_

Attorney Instructor's experience in bankruptcy and/or litigation matters: \_\_\_\_\_

\_\_\_\_\_

Number of law students enrolled in program: \_\_\_\_\_

Describe the practices of the clinical program in supervising the students: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What ability, if any, does the program have to represent non-English speaking clients?

\_\_\_\_\_

\_\_\_\_\_

Location Preference:

\_\_\_\_\_

Please return this form to the City Bar Justice Center, Attn: John McManus, Project Director, Pro Bono Consumer Bankruptcy Project by Facsimile to 212-768-1433 or by Mail to 42 West 44<sup>th</sup> Street, New York, NY, 10036-6689 or by Email at [jmcmanus@nycbar.org](mailto:jmcmanus@nycbar.org).