



RICHMOND PARALEGAL ASSOCIATION

Application for Membership

MEMBERSHIP CATEGORIES

ACTIVE MEMBERSHIP (VOTING PRIVILEGES): *Dues - \$75.00*

Any individual who has successfully completed a curriculum of training as a paralegal or 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; provided however, that all such schools, curricula and certifications shall be subject to the approval of this Association.

Any individual who has been continuously employed as a paralegal for a minimum of two (2) years by a licensed attorney, whose attorney-employer attests that such person is qualified as a paralegal.

Any individual who has successfully completed the CLA* examination administered by the National Association of Legal Assistants.

PROVISIONAL MEMBERS: Dues * \$50.00

Any individual who does not meet the requirements for active membership but is employed as a paralegal, whose employer (a licensed attorney) attests that such person is qualified as a paralegal. Provisional members will automatically become active members upon completion of two (2) years of provisional membership.

STUDENT MEMBER: Dues * \$25.00

Any individual who is a student in good standing in any approved university, college, junior college or other approved school pursuing a course of study as a paralegal; provided that all such schools and curricula shall be subject to the approval of this Association. A student shall be defined as one who has completed a minimum of twelve (12) semester hours or equivalent or who is taking all paralegal courses offered provided the individual is not employed as a paralegal.

RETIRED MEMBERS: Dues * \$25.00

Any individual who has retired from the paralegal profession, who currently resides in the Richmond metropolitan area, who is either a former member of the Association, or who would have qualified for membership as an active member.

The Association has Associate and Sustaining Memberships for those individuals who are members of bar associations and/or members of the educational field endorsing the paralegal concept, individuals or entities that are actively involved in the promotion of the paralegal profession and those individuals and entities that provide services to and who contribute \$100.00 or more annually. For more information on these membership categories, please contact the Membership Chairperson.

RPA does not recognize correspondence or home study courses as fulfilling the educational criteria necessary to become a member of the organization. In addition, our Bylaws prohibit our accepting a member who has been convicted of a felony.

The Richmond Paralegal Association is an affiliate of NALA and members are bound by the NALA Code of Ethics and Professional Responsibility in addition to any Code adopted by the Association.

PLEASE SEND CHECK (MADE PAYABLE TO RPA) AND COMPLETED FORM TO:

Richmond Paralegal Association
P.O. Box 384
Richmond, Virginia 23218

**RICHMOND PARALEGAL ASSOCIATION APPLICATION FOR MEMBERSHIP
TO BE COMPLETED BY ALL APPLICANTS**

Name _____ Home phone _____ Office phone _____

Mailing address _____

Email address _____

Employer _____

I hereby apply for membership in the Richmond Paralegal Association in the following category:

Active _____ Provisional _____ Student _____ Associate _____ Sustaining _____ Retired _____

I agree to be bound by the Code of Ethics and Professional Responsibility and the bylaws as adopted by the Richmond Paralegal Association. I further understand that this application is subject to approval by the Richmond Paralegal Association.

Date _____ Signature _____

TO BE COMPLETED BY APPLICANT FOR ACTIVE, PROVISIONAL, ASSOCIATE OR SUSTAINING MEMBERSHIP

Name _____ Employer _____
Business address _____
Email address _____
Name of immediate supervisor _____
How long employed as a paralegal? _____ Total years legal experience _____
Specialty area of practice (i.e., litigation, real estate) _____
Formal or special education (name and address of school) or training for present position: _____
Date of graduation _____ Emphasis (if applicable) _____
(NOTE: If no formal paralegal education, employer attestation form must be completed.)

Check the most appropriate description of your employer(s): Law department, non-profit organization _____ Judicial agency, court _____ Government legal agency _____ Corporate law department _____ Private law office _____ consisting of # attorneys _____ # legal personnel _____ other _____

ATTORNEY-EMPLOYER ATTESTATION

(To be completed when applicant has had no formal training for the position of paralegal)

I hereby attest that _____ is employed by me and is recognized as a paralegal and that he/she is under the supervision and direction of a lawyer, is capable of performing the following services as generally described by the American Bar Association's Standing Committee on Legal Assistants:

- Applying knowledge of the law and legal procedure in drafting legal documents and other papers in certain fields of the law.
- Exercising judgment and working independently with respect to assigning tasks, keeping and meeting deadlines.
- Preparing or interpreting legal documents for review by lawyers.
- Selecting, compiling and using technical information from such references as digests, encyclopedias, or practice manuals.
- Analyzing procedural problems and recommending solutions in certain fields of law.
- Preparing detailed office procedures for efficient handling of specialized field(s) of law.

I further attest that applicant has been employed by me as a paralegal for _____ years; that applicant's ethical and professional conduct are above reproach, and that he/she is recommended for membership in the Richmond Paralegal Association.

Firm _____
Address _____
Date _____ Signature _____

Approved by _____ on _____
Membership Committee Chair Date

TO BE COMPLETED BY APPLICANT FOR STUDENT MEMBERSHIP

School attending _____
Length of paralegal training program _____ Expected date of graduation _____

TO BE COMPLETED BY THE SCHOOL

I hereby attest that _____ is currently enrolled and has completed 12 semester hours (or equivalent) in the paralegal course at this school.

Your title _____
School _____
Signature _____ Date _____