



## APPLICATION FOR NEW\* MEMBERSHIP FOR 2018-2019

\*If you are currently a member, please use the "Annual Membership Renewal" form

Email Address (required): \_\_\_\_\_

Full Name: \_\_\_\_\_

Employer's Name (if applicable): \_\_\_\_\_

Preferred Contact Information (please note that this information will be published in our membership directory on the MPA website):

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

Telephone Number: \_\_\_\_\_

Please check all that apply:       NCCP     CLA     ACP     CP     OTHER: \_\_\_\_\_

**GENERAL MEMBERSHIP (\$70 Annual Dues – includes \$60 membership dues and a one-time application fee of \$10).** Please check applicable membership qualifications:

- I am a North Carolina Certified Paralegal (NCCP) as certified by the North Carolina State Bar Board of Paralegal Certification (Please attach a copy of your certificate).
- I am a Certified Legal Assistant (CLA) as certified by the National Association of Legal Assistants (NALA) (Please attach a copy of your certificate).
- I have successfully completed a curriculum of paralegal training and am employed under the direct supervision of a licensed practicing attorney (Please attach a copy of the diploma or certificate of program completion; supervising attorney must complete Attorney Attestation on the next page).
- I have completed at least three (3) years of continuous on-the-job training as a paralegal under the direct supervision of a licensed practicing attorney (Supervising attorney must complete Attorney Attestation on the next page).

**ASSOCIATE/STUDENT MEMBERSHIP (\$50 Annual Dues - includes \$40 membership dues and a one-time application fee of \$10).** Please check applicable membership qualifications:

- I have successfully completed a paralegal training program but am not currently employed as a paralegal (Please attach a copy of the diploma or certificate of program completion).
- I have been employed for less than three (3) years as a paralegal under the direct supervision of a licensed practicing attorney (Supervising attorney must complete Attorney Attestation on the next page).
- I am enrolled as a student in a paralegal education program (School must complete the School Attestation on the next page).
- I am an individual, attorney or paralegal program representative who endorses the paralegal concept, or is involved in the promotion of the paralegal profession.

Area of Practice (check all that apply):

<input type="checkbox"/> Administrative Law	<input type="checkbox"/> Criminal Defense	<input type="checkbox"/> Foreclosures	<input type="checkbox"/> Product Liability
<input type="checkbox"/> Banking/Finance	<input type="checkbox"/> Criminal Prosecution	<input type="checkbox"/> Healthcare	<input type="checkbox"/> Real Estate
<input type="checkbox"/> Bankruptcy	<input type="checkbox"/> Employee Benefits	<input type="checkbox"/> Immigration	<input type="checkbox"/> Regulatory/Utilities
<input type="checkbox"/> Civil Enforcement	<input type="checkbox"/> Environmental	<input type="checkbox"/> Intellectual Property	<input type="checkbox"/> Tax
<input type="checkbox"/> Civil Litigation	<input type="checkbox"/> Estate Planning/Trusts	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Wills/Estates/Probate
<input type="checkbox"/> Contracts	<input type="checkbox"/> Family Law	<input type="checkbox"/> Litigation	<input type="checkbox"/> Worker's Compensation
<input type="checkbox"/> Corporate	<input type="checkbox"/> Free Lance	<input type="checkbox"/> Personal Injury	<input type="checkbox"/> Other (describe below):

Other: \_\_\_\_\_

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

*With my signature, I hereby grant permission for the MPA to publish photographs of me taken at MPA events on the MPA website and Facebook page.*

## EMPLOYER/ATTORNEY ATTESTATION

I hereby attest that \_\_\_\_\_ is employed by me or my Firm/Company/Government Agency and is recognized as a paralegal, and that he/she, under the supervision of an attorney, is capable of the following services as generally described by the American Bar Association:

- Applying knowledge of the law and legal procedure in drafting legal documents and other papers in certain fields of law.
- Exercising judgment and working independently with respect to assigned tasks, keeping and meeting deadlines.
- Preparing or interpreting legal documents for review by attorney.
- 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.

I further attest that the applicant has been employed by me or my Firm/Company/Government Agency as a paralegal for \_\_\_\_ years and \_\_\_\_ months; that the applicant's ethical and professional conduct are above reproach, and that he/she is recommended for membership in the Metrolina Paralegal Association.

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

Employer/Firm/Company/Government Agency Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Supervising Attorney's Name: \_\_\_\_\_

Supervising Attorney's Signature: \_\_\_\_\_

## SCHOOL ATTESTATION

I hereby attest that \_\_\_\_\_

- is currently enrolled in or  
 has successfully completed the paralegal education program at this school.

I further attest that the applicant's ethical or professional conduct is above reproach, and that he/she is recommended for membership in the Metrolina Paralegal Association.

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

Name of School: \_\_\_\_\_

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

Representative of school: \_\_\_\_\_

Signature of representative: \_\_\_\_\_

### RETURN COMPLETED HARD COPY APPLICATION & CHECK TO:

Metrolina Paralegal Association  
ATTN: 1<sup>st</sup> VP, Membership  
Post Office Box 36260  
Charlotte, North Carolina 28236-6260

### OR COMPLETE YOUR APPLICATION ONLINE USING PAYPAL AT:

[www.charlotteareaparalegals.com](http://www.charlotteareaparalegals.com)

*\*Notice: Contributions or gifts to the Metrolina Paralegal Association are not deductible as charitable contribution for Federal income tax purposes; however, payments may qualify as ordinary and necessary business expenses.*