



531 Market Street, Camden, New Jersey 08102 legalclinic@voadv.org  
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### *I'd like to Volunteer UP!*

Volunteer Name: \_\_\_\_\_ Date: \_\_\_\_\_

Firm, Agency, or Law School: \_\_\_\_\_

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

Best E-Mail Address: \_\_\_\_\_

*Note: Volunteers will be added to the Clinic's email list unless otherwise specified.*

Primary Phone Number: \_\_\_\_\_  Work  Home  Mobile

Admitted to practice law in NJ, active status? \_\_\_\_\_ Attorney ID Number: \_\_\_\_\_

Main Practice Area(s): \_\_\_\_\_

Fluent in any language(s) beside English?: \_\_\_\_\_

Please indicate any and all areas that you are interested in handling *pro bono* for our clients:

- |   |   |
|---|---|
| <input type="checkbox"/> Adoption                     | <input type="checkbox"/> Employment                             |
| <input type="checkbox"/> Bankruptcy                   | <input type="checkbox"/> Family Law                             |
| <input type="checkbox"/> Child Abuse and Neglect      | <input type="checkbox"/> Government Benefits                    |
| <input type="checkbox"/> Civil Litigation             | <input type="checkbox"/> Health Care/Medical                    |
| <input type="checkbox"/> Civil Rights                 | <input type="checkbox"/> Immigration                            |
| <input type="checkbox"/> Criminal                     | <input type="checkbox"/> Landlord-Tenant/Housing                |
| <input type="checkbox"/> Custody/Guardianship         | <input type="checkbox"/> Municipal Fines/Warrants               |
| <input type="checkbox"/> Criminal Record Expungements | <input type="checkbox"/> Parental Rights(Termination/Surrender) |
| <input type="checkbox"/> Divorce                      | <input type="checkbox"/> Public Housing                         |
| <input type="checkbox"/> Domestic Violence            | <input type="checkbox"/> Tax                                    |
| <input type="checkbox"/> Drivers' License Restoration | <input type="checkbox"/> Wills/Power of Attorney/Estate         |
| <input type="checkbox"/> Education/Special Education  | Planning  |

Other (please explain): \_\_\_\_\_

Are you willing to mentor or train other volunteer Clinic attorneys or serve as a subject matter expert? If so, in what area(s)? : \_\_\_\_\_

Are you willing to speak at a community legal education seminar? If so, on what subject(s)?  
\_\_\_\_\_

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