

PART TWO:

1. Are there any disciplinary proceedings pending against you or have you ever been disciplined or suspended from practice in Massachusetts or any other jurisdiction? If yes, please explain.

2. Has there ever been a judgment against you in a malpractice action? If yes, please explain.

3. Have you ever been convicted of a criminal matter? If yes, please explain.

4. Has there ever been a civil judgment against you? If yes, please explain.

PART THREE:

Please print the names, addresses and telephone numbers (home and work) of three people who have known you for at least two years and are able to comment on your qualifications as an attorney and/or your experience working with children.

- 1.

- 2.

- 3.

I attest that this information is true to the best of my knowledge, and I authorize the Children's Law Center of Massachusetts, Inc., to make any inquires to determine my suitability for this program. I understand that a criminal record check will be conducted.

Signature

Date

CORI REQUEST FORM

Children's Law Center of Massachusetts has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an applicant for the Pro Bono program, I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

Applicant Signature

APPLICANT INFORMATION (PLEASE PRINT)

LAST NAME

FIRST NAME

MIDDLE INITIAL

DATE OF BIRTH

LAST 6 NUMBERS SOCIAL SECURITY NUMBER

SEX _____

RACE: _____

FATHER'S LAST NAME

FATHER'S FIRST NAME

MOTHER'S LAST NAME

MOTHER'S FIRST NAME

MOTHER'S MAIDEN NAME

****PLEASE SUBMIT A COPY OF YOUR LICENSE OR OTHER PHOTO IDENTIFICATION
WITH YOUR APPLICATION.****