

FBA-LA Mentorship Program - Application Form

CONTACT INFORMATION:

First Name:	Middle Name:	Last Name:
Email:	Phone Number:	Bar Number:
Work Place (Law Firm/Company/Gov. Agency):		
Address:		

EDUCATION AND LEGAL PRACTICE:

Law School:	Year Graduated:	Type of Practice (Private/Public/In house):
Practice Areas:	Years in Practice:	Current Position:

PARTICIPATION IN MENTORSHIP PROGRAM:

Preferred Meeting Locations: <input type="checkbox"/> Downtown <input type="checkbox"/> Westside <input type="checkbox"/> Santa Monica <input type="checkbox"/> Pasadena <input type="checkbox"/> San Fernando Valley <input type="checkbox"/> Other _____
Preferred Meeting Dates: <input type="checkbox"/> Weekday Evenings <input type="checkbox"/> Weekday Lunch <input type="checkbox"/> Weekends
Other Issues: <input type="checkbox"/> Second Career <input type="checkbox"/> Part-Time <input type="checkbox"/> Other _____

Mail this form to: Federal Bar Association, PO Box 10065, Burbank, CA 91510; or fax it to (818) 843-7423; or e-mail it to: fbala@emaoffice.com

To participate in the FBA-LA Mentorship Program, you must be a current member of the FBA.