## FBA-LA Mentorship Program - Application Form

## **CONTACT INFORMATION:**

First Name:	Middle Name:	Last Name:	
Email:	Phone Number:	Ba	ar Number:
Work Place (Law Firm/Company/Gov. Agency):			
Address:			
EDUCATION AND LEGAL PRACTICE:			
Law School:	Year Graduate	ed:	Type of Practice (Private/Public/In house):
Practice Areas:	Years in Pract	tice:	Current Position:
PARTICIPATION IN MENTORSHIP PROGRAM:			
Preferred Meeting Locations:			
□ Downtown □ Westside □ Santa Monica □ Pasadena □ San Fernando Valley □ Other			
Preferred Meeting Dates:			
□ Weekday Evenings □ Weekday Lunch □ Weekends			
Other Issues:			
□ Second Career □ Part-Time □ Other			

Mail this form to: Federal Bar Association, 210 N. Glenoaks Blvd. Ste C., Burbank, CA 91502; 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.