

NORTHEAST FLORIDA PARALEGAL ASSOCIATION



Application for New Membership

Annual membership term is based on the fiscal year October 1 to September 30.

MEMBERSHIP CATEGORY

- Active Membership \$60.00* Individuals employed as a paralegal or legal assistant by a lawyer, law office, corporation, government agency or other entity in a capacity that involves the performance of specifically delegated, substantive legal work under the direction and supervision of an attorney. **Must complete "Qualifications for Active Membership" section on page 2 and provide appropriate documentation.**
- Student Membership \$35.00* Individuals currently enrolled and in good standing in a legal studies program or those who have graduated less than one year from the date of this application. **Must provide proof of current enrollment in good standing or proof of graduation.**
- Associate Membership \$40.00* Individual attorneys or educators.
- Sustaining Membership \$105.00* Law firms, educational institutions, corporations, title companies, banks, or business individuals that provide support to paralegals or provide education and/or promote continuing development of the paralegal profession.

***All new members must also pay a one-time \$10.00 initiation fee.**

Note: On or after April 1, membership dues for new membership applicants are prorated for the remainder of the membership term; however, the \$10.00 initiation fee remains payable in full. For example, new Active Membership dues April 1 through September 30 are one-half of \$60.00 (\$30.00) plus \$10.00 initiation fee = \$40.00.

CONTACT INFORMATION

Name: _____ Certification(s): _____
List Contact Person for Associate or Sustaining Membership List all that apply (i.e., CLA, CP, CLAS, ACP, CFLA, FRP)

Area(s) of Specialty: _____

Employer/Business: _____

Business Address: _____ Home Address: _____

Business Phone: _____ Home Phone: _____

Business Email: _____ Home Email: _____

Preferred Communication Address: Business Home

EDUCATION

School Attended: _____

Date of Enrollment: _____/_____/_____ Degree Received: _____

Date of Graduation: _____/_____/_____ or Program Completed: _____

Date Received: _____/_____/_____

Check #: _____ Amount: \$ _____

Date Processed: _____/_____/_____

QUALIFICATIONS FOR ACTIVE MEMBERSHIP

Check all applicable criteria under which you qualify for active membership **and** provide the documentation indicated.

- Attained NALA certification (CLA, CP, ACP) (**attach** copy of NALA certificate).
- Graduated from an American Bar Association (ABA) approved legal studies program (**attach** proof of program's ABA approval **and** proof of graduation).
- Graduated from a course of study for paralegals/legal assistants institutionally accredited, but not ABA approved, which requires not less than the equivalent of at least 60 semester hours of classroom study (**attach** proof of graduation **and** transcript or course outline reflecting total classroom hours).
- Graduated from a course of study for paralegals/legal assistants other than those described above **PLUS** not less than six months of in-house training and/or experience as a paralegal/legal assistant whose supervising attorney attests, on the form attached, that I am a qualified paralegal/legal assistant (**attach** completed Attorney Attestation **and** proof of graduation).
- Graduated with a bachelor's degree (in any field) **PLUS** not less than six months of in-house training and/or experience as a paralegal/legal assistant whose supervising attorney attests, on the form provided, that I am a qualified paralegal/legal assistant (**attach** completed Attorney Attestation **and** proof of graduation).
- Graduated with a high school diploma or equivalency **AND** a minimum of three years of law-related experience under the direct supervision of an attorney **PLUS** not less than six months of in-house training and/or experience as a paralegal/legal assistant whose supervising attorney attests, on the form provided, that I am a qualified paralegal/legal assistant (**attach EITHER** completed Attorney Attestation **AND** proof of graduation; **OR**, if a Florida Registered Paralegal, proof of registration).
- Graduated with a high school diploma or equivalency **AND** a minimum of two years of in-house training and/or experience as a paralegal/legal assistant whose supervising attorney attests, on the form provided, that I am a qualified paralegal/legal assistant (**attach EITHER** completed Attorney Attestation **AND** proof of graduation; **OR**, if a Florida Registered Paralegal, proof of registration).

For purposes of determining membership qualifications, NEFPA has adopted the ABA's definition of a paralegal/legal assistant as a person qualified through education, training, and work experience who has been employed by a lawyer, law office, government agency, or other entity in a capacity that involves the performance of specifically delegated, substantive legal work (that is, not primarily clerical) under the direction/supervision of an attorney, such work for the most part requiring sufficient knowledge of legal concepts and principles that, absent such person, the attorney would perform the task.

For purposes of the above qualifications, "in-house training as a paralegal/legal assistant" means education of the employee by the attorney solely in the performance of paralegal/legal assistant duties, including appropriate instruction and supervision in accordance with the Rules governing Professional Responsibility and, in particular, Rule 4-5.3 of the Rules Regulating The Florida Bar, or comparable rules of other states regarding non-lawyer assistants.

CERTIFICATION

I certify that I qualify for the category of membership for which I am applying. I understand that this application is subject to approval by NEFPA and that by signing below NEFPA is authorized to contact necessary persons (including the person who executed the Attorney Attestation, if applicable) and/or any educational institution for verification or clarification of membership qualifications. I agree that, upon approval of my application, I will abide by the NALA Code of Ethics and Professional Responsibility and the Bylaws adopted by NEFPA.

Date: ____/____/____

Signature: _____

Make checks payable to NEFPA and mail with appropriate documentation to:

NEFPA

Attention: Second Vice President - Membership

221 North Hogan Street, Box 164

Jacksonville, FL 32202

NORTHEAST FLORIDA PARALEGAL ASSOCIATION, INC.

Attorney Attestation

I hereby certify that, _____, an applicant for membership with Northeast Florida Paralegal Association, Inc. (“NEFPA”), has been or was employed by me and/or by my firm or company as a paralegal/legal assistant during the period from _____ to _____.

It is my understanding that, for the purposes of eligibility, the term “paralegal/legal assistant” is as defined by the American Bar Association (“ABA”): a person “qualified by education, training or work experience who is employed or retained by a lawyer, law office, corporation, governmental agency or other entity who performs specifically delegated substantive legal work for which a lawyer is responsible.” (Adopted by the ABA in 1997 and endorsed in 2001 by NALA.)

I further understand that, for purposes of NEFPA Active membership qualification, “in-house training as a paralegal/legal assistant” means attorney education of the employee solely as a paralegal/legal assistant, performing substantive legal work for which an attorney would otherwise be responsible, including review and analysis of assignments and a reasonable amount of instruction related directly to the duties and obligations of the paralegal/legal assistant.

This Attestation is made and given with full knowledge of penalties and liabilities resulting from false statements and misrepresentations therein.

Date: ____/____/____ Signature: _____
Printed Name: _____
Law Firm/Company: _____
Address: _____

Telephone No.: _____