

**SUPREME COURT OF ARKANSAS
ARKANSAS CONTINUING LEGAL EDUCATION BOARD
2100 RIVERFRONT DRIVE, SUITE 110
LITTLE ROCK, AR 72202
Telephone: 501-374-1855
Facsimile: 501-374-1853**

**APPLICATION FOR STATUS AS AN APPROVED
PRO BONO SPONSORING ENTITY**

(Please type or print)

1. Name of Applicant Entity: _____

2. Address: _____

3. Name of contact person: _____

Telephone No.:()- _____ **Facsimile No.:()** _____

4. Do you use volunteer attorneys to provide legal services without fee or expectation of fee to a person of limited means? _____

5. How are attorneys chosen to provide the legal services without fee or expectation of fee to a person of limited means?

6. How do you receive funding for your pro bono program or services?

7. How will you seek to verify the number of hours the assigned attorney performed in legal services?

RESPONSIBILITIES OF AN APPROVED PRO BONO SPONSOR

If the applying entity is granted status as an approved sponsor for pro bono, by signature of appropriate party below, the entity agrees:

to abide by the Arkansas Rules and Regulations for Minimum Continuing Legal Education;

to timely and accurately verify that the attorney listed in the CLE reporting form accepted a case referral from the entity;

to timely and accurately verify that the attorney agreed to charge no fee for handling the case;

to timely and accurately verify that the entity screened the client for financial eligibility and the client was determined to be a person of limited means, unable to afford an attorney;

to advise the assigned attorney that no more than three (3) general CLE hours may be granted in each reporting period;

and,

to be able to confirm to the best of the entity's representative's knowledge that the pro bono hours reported by the assigned attorney were actually completed.

The applying entity acknowledges that approved sponsor status may be withdrawn for failure to comply with the Arkansas Rules and Regulations for Minimum Continuing Legal Education, or, for failure to comply with the agreements and representations contained in this application.

Applicant Entity: _____

By: _____

Title: _____

Date: _____