

**2007 PBA PRO BONO
AWARDS NOMINATION FORM**

Name of Nominee: _____

Nominated for:

Pro Bono Award (Please answer all questions below)

Judges Award (Please answer questions 1, 8-11 only, and mail supporting documents to David Trevaskis, PBA, PO Box 186, Harrisburg, PA 17108)

Civil Legal Aid Attorney of the Year Award (Please answer questions 1, 8-11 only, and mail supporting documents to David Trevaskis, PBA, PO Box 186, Harrisburg, PA 17108)

Home Address: _____

Home Phone

()

Employer: _____

Work Address: _____

Work Phone

()

Email

- 1.) Why does your nominee deserve the award for which he or she is being nominated?

- 2.) Does the nominee provide free legal assistance through a *pro bono* program; i.e., legal aid society, local bar association, *pro bono* project, lawyer referral service no-fee panel, etc? No: _____ Yes: _____
If yes, name of program(s): _____

- 3.) Please estimate the number of *pro bono* hours donated in the last year: _____

4.) Number of clients served in the last year as a result of nominee's *pro bono* activities: _____

5.) In what ways has the nominee voluntarily contributed a significant portion of time to providing legal services to poor people without charge? Was the contribution primarily by way of participation in *pro bono* program(s) mentioned above? (Please attach additional sheet, if necessary)

6.) What are the nominee's principal areas of practice? _____

7.) Please specify in which areas of practice the nominee's contribution has been made: _____

8.) In which local, state and national bar associations or professional organizations is the nominee a member? For each association or organization, please provide sections, chairmanships, committees or other positions or activities in which he/she participates:

9.) How did this nominee's service help children and families that touch the system? Is there any other information you wish to provide about the nominee?

10.) Does the nominee know he/she is being nominated for this award? _____

11.) Name of person/organization submitting this nomination, address & phone number:

Name: _____

Address: _____

Phone Number: () _____

Fax Number () _____

Email _____

Please return this form no later than April 20, 2007 to:
David Keller Trevaskis
PBA, 100 South Street, P. O. Box 186, Harrisburg, PA 17108-0186
Or via Fax: 717-238-7182 or via E-mail to david.trevaskis@pabar.org