



## Private Attorney Involvement (PAI) Questionnaire

“A lawyer should aspire to render at least 50 hours of *pro bono publico* legal services per year.”  
Minnesota Professional Rules of Conduct (MPRC) Rule 6.1

Through LSNM’s PAI panel, attorneys share their time and talent as Pro Bono and/or Judicare attorneys. *Pro Bono* Attorneys donate their time and receive one hour of CLE credit for every six hours of *pro bono* legal assistance. Judicare Attorneys typically provide more extended representation or service and receive nominal compensation, currently \$90 per hour. All PAI panelists may attend LSNM sponsored CLE’s complimentary.

1. Name: \_\_\_\_\_ Firm Name: \_\_\_\_\_  
Office Address: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
MN Attorney License #: \_\_\_\_\_ Are you in Good Standing Y  N   
Date of admission to any Bar (specify which court(s)): \_\_\_\_\_  
Are you a Member of the Minnesota State Bar Association (MSBA)? Y  N   
If you would like an assistant included on correspondence, please list below:  
Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

2. I am willing to assist LSNM-eligible clients in the following ways:
- Specialty Law Clinic (assist in drafting/review pro se forms, etc.)
  - Criminal Expungement
  - Health Care Directives, Powers of Attorney, Simple Wills
  - Family ( Divorce,  Custody)
  - Self-Help Clinic (general walk-in/virtual legal clinic)
  - Telephone Advice Panel (advise clients via telephone from your own office)
  - Brief Services (review documents, draft forms)
  - Mediation Services for the following case types: \_\_\_\_\_
  - Extended Representation (full representation in court or administrative hearing)

3. I am willing to serve clients in the following counties: (Please check all applicable boxes.)

- |                                     |  |                                     |                                   |                                 |
|-------------------------------------|--|-------------------------------------|-----------------------------------|---------------------------------|
| <input type="checkbox"/> Any/All    | <input type="checkbox"/> Virtual Hearings  |                                     |                                   |                                 |
| <input type="checkbox"/> Becker     | <input type="checkbox"/> Grant             | <input type="checkbox"/> Marshall   | <input type="checkbox"/> Pope     | <input type="checkbox"/> Wadena |
| <input type="checkbox"/> Beltrami   | <input type="checkbox"/> Hubbard           | <input type="checkbox"/> Norman     | <input type="checkbox"/> Red Lake | <input type="checkbox"/> Wilkin |
| <input type="checkbox"/> Clay       | <input type="checkbox"/> Kittson           | <input type="checkbox"/> Otter Tail | <input type="checkbox"/> Roseau   |                                 |
| <input type="checkbox"/> Clearwater | <input type="checkbox"/> Lake of the Woods | <input type="checkbox"/> Pennington | <input type="checkbox"/> Stevens  |                                 |
| <input type="checkbox"/> Douglas    | <input type="checkbox"/> Mahnomen          | <input type="checkbox"/> Polk       | <input type="checkbox"/> Traverse |                                 |

4. Please mark which areas of law you are interested in assisting clients.

**P = Pro Bono J = Judicare** (Please check all applicable boxes.)

<b>P</b>	<b>J</b>		<b>P</b>	<b>J</b>	
<input type="checkbox"/>	<input type="checkbox"/>	<b>Consumer</b>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Housing/Real Estate</b>
<input type="checkbox"/>	<input type="checkbox"/>	Bankruptcy	<input type="checkbox"/>	<input type="checkbox"/>	Contract for Deed
<input type="checkbox"/>	<input type="checkbox"/>	Consumer Debt/Garnishment	<input type="checkbox"/>	<input type="checkbox"/>	Eviction Expungement
<input type="checkbox"/>	<input type="checkbox"/>	Conciliation Court	<input type="checkbox"/>	<input type="checkbox"/>	Foreclosure
<input type="checkbox"/>	<input type="checkbox"/>	<b>Education</b>	<input type="checkbox"/>	<input type="checkbox"/>	Landlord/Tenant
<input type="checkbox"/>	<input type="checkbox"/>	IEP			(private <input type="checkbox"/> subsidized <input type="checkbox"/> )
<input type="checkbox"/>	<input type="checkbox"/>	Expulsion/Suspension	<input type="checkbox"/>	<input type="checkbox"/>	Real Estate Transactions
<input type="checkbox"/>	<input type="checkbox"/>	<b>Employment/Unemployment</b>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Estate and Personal Planning</b>
<input type="checkbox"/>	<input type="checkbox"/>	Discrimination	<input type="checkbox"/>	<input type="checkbox"/>	General Estate/Probate Planning
<input type="checkbox"/>	<input type="checkbox"/>	Employment-Wages/Termination	<input type="checkbox"/>	<input type="checkbox"/>	Guardianship/Conservatorship
<input type="checkbox"/>	<input type="checkbox"/>	Unemployment	<input type="checkbox"/>	<input type="checkbox"/>	Health Care Directive
<input type="checkbox"/>	<input type="checkbox"/>	<b>Family/Protective Orders</b>	<input type="checkbox"/>	<input type="checkbox"/>	Power of Attorney
<input type="checkbox"/>	<input type="checkbox"/>	Custody/Parenting Time	<input type="checkbox"/>	<input type="checkbox"/>	Simple Will
<input type="checkbox"/>	<input type="checkbox"/>	Divorce	<input type="checkbox"/>	<input type="checkbox"/>	Special Needs Trust
<input type="checkbox"/>	<input type="checkbox"/>	Grandparent/Third Party Custody	<input type="checkbox"/>	<input type="checkbox"/>	<b>Other</b>
<input type="checkbox"/>	<input type="checkbox"/>	Stepparent Adoption	<input type="checkbox"/>	<input type="checkbox"/>	Insurance
<input type="checkbox"/>	<input type="checkbox"/>	HRO	<input type="checkbox"/>	<input type="checkbox"/>	Name Change
<input type="checkbox"/>	<input type="checkbox"/>	OFF	<input type="checkbox"/>	<input type="checkbox"/>	Social Security/SSI
			<input type="checkbox"/>	<input type="checkbox"/>	_____

5. You may contact me about working with click here to insert number LSNM clients per  month  year.

6. I am willing to  teach a CLE and/or  mentor LSNM attorneys in the following legal area(s):

7. I am interested in attending CLE's in the following legal area(s): \_\_\_\_\_

and prefer to attend CLE's:  In-Person  Via Webinar

8. I would like to be a Partner in Justice by making a charitable contribution to LSNM in the amount of \$\_\_\_\_\_ on a  monthly  yearly  one time basis.

9. What are the best ways LSNM could show appreciation to you? \_\_\_\_\_

10. What else would you like LSNM to know or understand? \_\_\_\_\_

11. **For Judicare only.** Please make Judicare checks payable to: \_\_\_\_\_

Provide LSNM with your firm's Federal I.D.#: \_\_\_\_\_

If your firm does not have a Federal I.D.#, Please give your SSN: \_\_\_\_\_

**Please submit your completed form to: [Pai@LSNMLaw.org](mailto:Pai@LSNMLaw.org)**

**Thank you very much. We are so very grateful you are part of LSNM's PAI program.**