



VERMONT
PARALEGAL
ORGANIZATION

MEMBERSHIP APPLICATION

Name: _____ Date: _____

Title: _____ Number of Years Paralegal Experience: _____

Employer Name and Mailing Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Where would you like to receive mailings? Home* or Work

*Please include home mailing address _____

Education: H.S.&/or Certificate AS/AA Degree BS/BA Degree Master's Degree
Specific Major(s): _____

Current Employment: Law Firm Corporation State/Federal Gov't Other: _____

Primary Practice Areas: Civil Litigation Real Estate Family Law Probate

Corporate Criminal Law Other _____ Wages: Exempt or Non-Exempt

Are you a Registered Paralegal (R.P.)? _____ Would you like more information on becoming a Registered Paralegal? _____

Position on possible licensing or regulation of paralegals: Yes No Undecided

CLE Preferences: Full Day 1/2 Day Either Interested in CLEs on _____

CRITERIA FOR VOTING MEMBERSHIP

FULL VOTING MEMBERSHIP requires that a person be currently employed as a paralegal*, AND fulfill ONE of the following criteria categories: {Associate membership is available to those who have not yet completed the requirements.} **Please circle the criteria that applies to you:**

- A. Bachelors degree + paralegal certificate + 6 months in-house paralegal training;
- B. Associates degree (or equivalent number of credits) + paralegal certificate + 1 year in-house paralegal training;
- C. Associates or bachelors degree with concentration in paralegal studies + 1 year in-house training;
- D. High school diploma + paralegal certificate + 2 years in-house paralegal training;
- E. Bachelors degree + 1 year in-house paralegal training;
- F. Associates degree or equivalent number of credits + 2 years in-house paralegal training;
- G. High school diploma + 4 years in-house paralegal training.

*Any person applying under criteria E-G is required to file an employment affidavit stating that 60% of the work performed is substantive legal work. A form is provided with this application.

Membership Dues*:
{Please refer to criteria on page 1}

<input type="checkbox"/> VOTING:	Employed as a paralegal¹	\$70 per year
<input type="checkbox"/> ASSOCIATE:	{non-voting} students/non-paralegals	\$40 per year
<input type="checkbox"/> SUSTAINING:	{non-voting}	\$105 per year

***All new member dues received after July of any year will be pro-rated for membership until the end of the year as follows: Associate \$20 or Voting \$35. New members applying prior to July are subject to the full dues amount as shown above. Dues for the start of the following calendar year will be billed at the full amount of \$40 or \$70.**

In recognition of the importance of continuing education, the VPO strongly recommends that members fulfill at least 8 credit hours of continuing legal education per year.

**I'd like to help the VPO become a stronger organization by
volunteering to serve on the following committee(s):**

- | | | |
|--|---|--|
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Finance | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> By-Laws | <input type="checkbox"/> Job Development | <input type="checkbox"/> Professional Liaison |
| <input type="checkbox"/> Continuing Ed. | <input type="checkbox"/> Legislative Affairs | <input type="checkbox"/> Scholarship |
| <input type="checkbox"/> Ethics | <input type="checkbox"/> Membership | <input type="checkbox"/> Website |

Please make check payable to “VERMONT PARALEGAL ORGANIZATION” and return to: Vermont Paralegal Organization, P.O. Box 5755, Burlington, VT 05402-5755.

Thank you.

If you have any questions, please contact Laurie Noyes at lnoyes@ppeclaw.com or by calling (802) 864-0880.

¹Regardless of job title, the VPO considers a paralegal to be anyone that falls under the ABA's definition of paralegal:

A legal assistant or paralegal is 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)

EMPLOYER AFFIDAVIT

1. I, _____, am an Attorney licensed to practice law in the State of _____.

2. _____ has been employed by me as a paralegal/legal assistant² since _____ . During such employment period, at least 60% of the work delegated and/or assigned to and performed by him/her, under the supervision of an attorney, was substantive³ legal work customarily, but not exclusively, performed by a lawyer.

3. The work assigned to _____ during such employment was of good quality and completed in a manner satisfactory to me.

DATED at _____, this ____ day of 20__.

Signature of Employer

STATE OF _____
_____ COUNTY, SS.

At, _____, in said County, this _____ day of _____, 20__ personally appeared _____, and he/she acknowledged this instrument, by him/her sealed and subscribed, to be his/her free act and deed.

Before me: _____
Notary Public
My commission expires: _____

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³ Substantive shall mean work requiring recognition, evaluation, organization, analysis, and communication of relevant facts and legal concepts.