

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MISSOURI

PRO BONO PANEL APPLICATION

NAME _____ FIRM _____
(last) (first) (middle)

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

FIRM CONTACT *(for Law Firm Volunteers)*: _____

PHONE _____ FAX _____ E-MAIL _____

Admitted to the Bar of the U.S. District Court for the Eastern District of Missouri? Yes No

DATE ADMITTED TO THE BAR: _____

I am licensed to practice in the following states: _____

Please indicate any areas of legal specialization or case interest: _____

I am willing to provide Pro Bono Legal Assistance for these District Divisions:

Eastern Division

Southeastern Division

Northern Division