

CIVIL PRO BONO LEGAL SERVICES PROGRAM

**United States District Court
Northern District of Ohio**

Name: _____ Phone: _____

Firm Name: _____

E-Mail: _____

Address: _____

City: _____ State: _____ Zip: _____

Bar Number: _____ Prefer Assignments in: Eastern _____ Western _____ Division

I participate in the Civil Pro Bono Legal Services Program for the U.S. District Court for the Northern District of Ohio. My civil practice areas of preference are:

1. _____

2. _____

3. _____

My most recent federal court appearances are (case name and number):

1. _____

2. _____

3. _____

I was admitted to practice in the Northern District of Ohio on _____. I have read the Pro Bono Protocol and agree to follow the procedure for expense reimbursement.

Date: _____

Return to:
Office of the Clerk
United States District Court
Northern District of Ohio
801 W. Superior Ave.
Cleveland, OH 44113