## **Pro Bono Opportunities**

## NJ State Bar Web Posting Form

A. Contact Information

Organization Name: Pro Bono Partnership Contact Name: Christine Michelle Duffy, Esq. Organization Address: 3799 Route 46 Contact E-mail: cduffy@probonopartner.org

Suite 211

Parsippany, NJ 07054 Telephone #: (973) 240-6955 www.probonopartner.org Fax #: (973) 240-6966

Web Address:

## **B.** Organization Information

1. In a few sentences state the overall mission of your organization:

Pro Bono Partnership provides meaningful pro bono opportunities for corporate transactional lawyers to serve nonprofit charitable organizations. Pro Bono Partnership is a §501(c)(3) organization.

services.		, ,			
	Seniors/Elderly	□ Children/Fami	ilies		
	HIV/AIDS	□ Disabled			
	Low-income generally	☐ Immigrants			
Other: Pro Bono Partnership provides free transactional legal services to nonprofits that serve poor and disadvantaged populations, enabling them to more effectively feed the hungry, house the homeless, promote the arts, protect the environment, and provide essential programs to children, the elderly, individuals with disabilities, the unemployed, survivors of domestic or sexual					

2. Please use the boxes (check as many as apply) and lines below to identify and briefly describe the population(s) for which your organization provides services, be sure to include information on

characteristics such as age, disability or income, that might be used in establishing eligibility for your

3. In a few sentences describe the types of legal services provided by your organization:

abuse, immigrants, and veterans.

Pro Bono Partnership, through its staff lawyers and the outside counsel it partners with, provides free legal services to eligible nonprofits on matters such as (1) contract and lease reviews, (2) corporate structure and governance, (3) employment law counseling, (4) environmental, health, and safety law, (5) healthcare law, (6) intellectual property, (7) internet/e-commerce, (8) mergers and dissolution, (9) privacy and data breach issues, (10) real estate transactions, and (11) tax law and tax-exempt status compliance.

	area:

**Statewide** 

☐ County based (please list counties served)

☐ Locally based (please list areas served)					
C. Pro Bono Opportunities					
5. Please use the boxes below, by checking the indicate the substantive areas in which you are	general topic area and any specific sub-specialties, to re seeking <i>pro bono</i> support.				
□ <b>Family</b> □ Custody	□ Housing/Landlord Tenant				
<ul> <li>□ Child Support</li> <li>□ Divorce</li> <li>□ Domestic Violence</li> <li>□ Termination of Parental Rights</li> <li>□ Visitation</li> </ul>	■ Immigration (Advice for Employers Only)  □ Asylum □ Naturalization				
□ <b>Health</b> □ SSI/SSD	□ Consumer □ Bankruptcy				
□ Wills	<ul><li>□ Credit/Debt counseling</li><li>□ Predatory Lending</li></ul>				
Transactional	□ Senior/Elder law				
Nonprofit Corporate Law	☐ Bankruptcy				
Community Development	□ Credit Counseling				
■ Tax Law and Compliance	☐ Predatory Lending				
☐ Civil Rights	Employment/Unemployment (Advice for Employers Only)				
□ Guardianship					
Corporate Structure, Environmental, Heal Healthcare Law Intellectual Property Internet/E-commerce	Intellectual Property Internet/E-commerce Privacy and Data Breach Issues				
6. Does your organization provide substantive t	raining to volunteer attorneys?				

If yes, please describe:

□ Yes

□ No

Forms, templates, subject matter seminars, and general assistance from staff lawyers.

■ In some cases

	Litigation support	□ Yes ■ N	lo		
	Fee waivers	□ Yes ■ N	lo		
	Translators	□ Yes ■ N	No		
	Other	■ Yes □ N	No		
■Malpractice insurance, co-counsel when appropriate, forms, templates, subject matter seminars, and general assistance.					
8. What, if any, supervision does your organization provide for volunteer attorneys?					
Pro Bono Partnership oversees all matters and co-counsels when appropriate.					
9. Does your organization provide malpractice coverage for volunteer attorneys?					
	■ Yes □ No				
If yes, please describe:					
Please call Pro Bono Partnership for details.					
10. Does your organization require volunteer attorneys to carry malpractice insurance?					
	□ Yes ■ N				
If yes, please explain:					
11. Has the New Jersey Supreme Court approved your program for a <u>Madden</u> exemption?					
	■ Yes □ No				

7. Does your organization provide other types of support? If yes, please explain.