

A. Contact Information

Organization Name:

Legal Services of Northwest Jersey

Organization Address:

90 East Main Street
Somerville, New Jersey 08876

Organization Web Address:

<http://www.LSNWJ.org>

Contact Name:

Sharon Yoo

Contact Email:

syoo@lsnj.org

Phone Number:

19082310840

B. Organization Information

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

Legal Services of Northwest Jersey provides free comprehensive civil legal assistance in Hunterdon, Morris, Somerset, Sussex, and Warren Counties for people with limited income. LSNWJ's priority is to provide equal access to justice to protect its clients' basic needs that are critical for self-sufficiency: income, safe and affordable housing, access to quality health care, family stability and personal safety, and life with dignity in the community. LSNWJ targets its services to those with urgent and critical needs including older adults, people with disabilities, individuals experiencing domestic abuse, and people striving to maintain their independence in the community.

2. Please select the boxes (check as many as apply) 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 services.

Children/Families, Disabled, HIV/AIDS, Seniors/Elderly, Low-income generally, veterans

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

Housing, family, consumer, public entitlements, health care access, expungements, driver's license restoration, guardianship, wills, and powers of attorney

4. Service area:

County based (please list counties served)

Please specify the county or counties where your services would be applicable

Hunterdon, Morris, Somerset, Sussex and Warren Counties

C. Pro Bono Opportunities

5. Please use the boxes below, by checking the general topic area and any specific sub-specialties, to indicate the substantive areas in which you are seeking pro bono support.

Consumer, Guardianship, Housing/Landlord Tenant, Wills, expungements, driver's license restoration

You selected Consumer please select any sub specialties

Bankruptcy, Credit/Debt counseling

6. Does your organization provide substantive training to volunteer attorneys?

Yes

If yes, please describe:

We provide training on landlord tenant, drafting of simple wills and powers of attorney, expungement, guardianship, and driver's license restoration.

7. Please select any of the following support your organization provides. Next you'll be ask to explain further.

Litigation support, None of the options presented

You selected Litigation support please explain further

If needed, you will be paired with a staff attorney for mentorship

8. What, if any, supervision does your organization provide for volunteer attorneys?

If needed, you will be paired with a staff attorney for mentorship

9. Does your organization provide malpractice coverage for volunteer attorneys?

Yes

If yes, please describe:

Volunteer attorneys are covered under our policy.

10. Does your organization require volunteer attorneys to carry malpractice insurance?

No

11. Has the New Jersey Supreme Court approved your program for a Madden exemption?

Yes