REQUEST FORM
PRO BONO ASSISTANCE

Date: ______________________

Sponsoring Organization/Agency/Firm: ____________________________________________________________

Type of Organization (please check)
☐ Bar Association      ☐ Government      ☐ Public Interest
☐ Community Legal Education ☐ Legal Aid      ☐ Faculty Project
☐ Public Defenders       ☐ Legislator      ☐ Other: ________________
☐ Firm/Private Attorney (Pro Bono Work) ☐ Non-Profit

Contact Person and Title: _______________________________________________________________

Address: ____________________________________________________________

City: ___________________________ State: ___________ Zip: ________________

Phone: __________________ Fax: __________________ Email: __________________

DESCRIPTION OF PLACEMENT

Brief description of the pro bono assignment:
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

Describe the supervisory arrangement and training for the student and the contact information for the supervising attorney, if different from above:
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

Length of pro bono assignment: ____________________________

Minimum number of hours student must commit to the assignment: _______________________

Preferred allocation of hours: flexible ______ minimum hours: per week __________ per day _______

Number of students needed: _________________________

What level of students are appropriate for this work? (check all that apply) ☐ 1L  ☐ 2L  ☐ 3L

Any special qualifications needed to do this assignment? (e.g., courses taken, languages, previous work experience)
_______________________________________________________________________________
_______________________________________________________________________________

If interested in submitting a request for student pro bono assistance please complete and submit this form to Danny Murphy at: danny.murphy@uky.edu, or 116B Mandrell Hall, Lexington, KY 40506