

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF INDIANA

**APPLICATION FOR MEMBERSHIP ON CIVIL LEGAL ASSISTANCE PANEL**

I, \_\_\_\_\_, having been admitted to practice before the United States District Court for the Southern District of Indiana and being a member in good standing of the Bar of such Court, do hereby request and apply for membership in the Civil Legal Assistance Panel of that Court. In support of this application I have supplied the following information:

Full Name: \_\_\_\_\_ Firm Name: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Business Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ (including County) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Business Telephone.: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

Highest Court to which admitted: \_\_\_\_\_

Date admitted to practice before the United States District Court for the Southern District of Indiana: \_\_\_\_\_

Specialized Area of Law (if any): \_\_\_\_\_

In making this application, I represent that I am willing to represent civil litigants determined to be eligible for representation under any applicable statutory authority and for whom the appointment of counsel has been ordered pursuant to Rule 4.6 of the Local Rules of the United States District Court for the Southern District of Indiana. In addition, I shall supplement this Application in writing from time to time as requested by the Court and as circumstances warrant so as to keep the Court informed of any change in my address or other information relevant to my membership on the Civil Legal Assistance Panel,

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
\* \* \* \* \* \* \* \* \* \* \* \* \* \*

**For use by the Court**

Appointed to Civil Legal Assistance Panel of Attorneys on \_\_\_\_\_, 19\_\_\_\_.  
Member of sub-panel for the \_\_\_\_\_ Division.

Execute original only and return to: Clerk  
United States Courthouse, Room 105  
46 East Ohio Street  
Indianapolis, Indiana 46204