



Oklahoma City Chapter
Mentorship Program – Application
Due January 29, 2016

Name: _____

Home
Address: _____

Work
Address: _____
(with firm
name, if
applicable) _____

Phones: Mobile – _____ Home – _____

 Work – _____

E-mail: _____

OBA No.: _____

I hereby request membership in the Mentorship Program of the Oklahoma City Chapter of the Federal Bar Association.

I understand that the Program requires a one-year commitment with six total meetings: one half-day meeting and five meetings around lunch period.

I will attend those meetings and will also make myself available for all other meetings called by my Mentor.

I am a member of the Oklahoma City Chapter of the Federal Bar Association.

I certify I have been a member of the Bar of the State of Oklahoma for less than 5 years at the time of my application and am not currently under disciplinary proceedings by the Bar of the State of Oklahoma or any other state bar.

Signature

Date

Once you have completed this document, please e-mail it to: elizabeth_labauve@okwd.uscourts.gov.

If you have questions about the Mentorship Program, please transmit those questions via e-mail to

elizabeth_labauve@okwd.uscourts.gov, who will transfer them to the Mentoring Committee.