



CAPA PROTEGE SIGN UP FORM

1. Name: _____
2. Mailing Address: _____

3. Telephone No.: _____
Text messaging: YES _____ NO _____
4. Email Address: _____
5. Employer/School: _____
6. Employer/School Area of Town: _____
7. CAPA Membership Status: ___ Voting ___ Associate ___ Student
Number of years' experience as a paralegal: _____
(Students Only) Completion status of paralegal program: _____
8. Practice Areas: What area of law/specialty area are you either (1) currently employed or (2) interested in pursuing, if known (please check all that apply):
 - Administrative, Governmental and Regulatory
 - Banking, Finance and Investment
 - Civil Trial Litigation
 - Alternative Dispute Resolution
 - Criminal Law
 - Bankruptcy
 - Estate Planning & Probate Law
 - Personal Injury Trial Law
 - Consumer Law
 - Intellectual Property Law
 - Labor & Employment Law
 - Corporate Law
 - Environmental and Natural Resources
 - Public Utility, Energy & Energy Resources Law
 - Family Law
 - Real Estate Law
 - Freelance
 - Tax Law
 - Immigration Law
 - Civil Rights
 - Education Law
 - Elder Law
 - Other: _____
 - Fiduciary Litigation

9. What are your main reasons for wanting to have a mentor?
- General paralegal knowledge
 - Procedural knowledge in a specific area of law
 - Networking with other paralegal professionals
 - Gaining knowledge of and participation in CAPA activities
 - Wanting to have someone to vent to about work stresses
 - Resume review
 - Other: _____

10. Are you open to being paired with a Mentor who does not necessarily work in the same field of law as you if we do not have a Mentor available in the same field?

YES _____ NO _____

(We will definitely try our hardest to get you a Mentor in the field you work in or are interested in. If you select "No", please note that we will add you to a waiting list.)

11. Can you commit to be responsive to your Mentor's efforts to communicate with you and will you let us know if your Mentor does not respond to your communication efforts?

YES _____ NO _____

Your mentor assignment will be for one (1) year and you will be required to sign up again for another year if you would like to continue with the Mentor Program. This program is meant for paralegals who have less than 3 years work experience as a paralegal, who have spent less than 3 years working in their current field of law, or are looking to change areas of law.

The undersigned certifies that he/she has read the guidelines for Protege applicants and agrees to abide by them.

Signature

Date

Return the signed and completed form to:

Catherine Mackoy & Laura Kliman, Co-Chairs Mentor Committee

Email: mentor@capatx.org

If you need to mail or fax it, please email for address or fax number