## \*\*\*Volunteer Attorneys Needed\*\*\*\* Hartford Family Volunteer Attorney Program

The Judicial Branch would like to announce that the Family Volunteer Attorney Program will resume in Hartford at Hartford Superior Court, 90 Washington Street in October. The program will begin on Wednesday, October 5, 2016 and run through Wednesday, June 21, 2017 on the first and third Wednesday of each month.

This program utilizes the services of volunteer attorneys to provide legal advice and assistance to self-represented parties who have or may be commencing domestic and/or family support magistrate cases.

Since 2010, Hartford's Family Volunteer Attorney Program has assisted 2,354 self-represented parties in the area of family law. Family Volunteer Attorney Programs in the Waterbury and Stamford judicial districts have also been very successful in providing assistance to self-represented parties.

All of the Volunteer Attorney Programs work in cooperation with the Court Service Centers and the Judicial Branch law libraries to provide additional assistance to self-represented parties who might otherwise be unable to benefit from the assistance of counsel.

If you would like to volunteer, please complete the application which accompanies this notice and email it to <u>Damon.Goldstein@jud.ct.gov</u> or fax it to (860) 263-2773. If you have any questions about the program, please contact Damon Goldstein at Court Operations at 860-263-2734 or <u>Damon.Goldstein@jud.ct.gov</u>.



## <u>Volunteer Attorney Program</u> Helping the Community with Legal Matters

Damon Goldstein Caseflow Management Specialist

Superior Court Operations Unit 225 Spring Street, Wethersfield, CT 06109 Phone: 860-263-2734 Fax: 860-263-2773

| Application for the Volunteer Attorney Program at this District | Case Type      |          | Dates   |  |  |
|---|----------------|----------|---|--|--|
| Hartford Judicial District                                      | Family Matters |          | October 2016 through June 2017                |  |  |
|   |                |          |   |  |  |
| Attorney Name   |                |          | Juris Number                                  |  |  |
|   |                |          |   |  |  |
| Address Line 1  |                |          |   |  |  |
|   |                |          |   |  |  |
| Address Line 2  |                |          |   |  |  |
|   |                |          |   |  |  |
| City  | State          | Zip code | Office Phone Number Extension                 |  |  |
|   |                |          | ( ) -   |  |  |
| Email Address   |                |          | Contact Phone Number (if different) Extension |  |  |
|   |                |          | ( ) -   |  |  |
|   |                |          | · · /   |  |  |

## How many years have you been practicing law?

## Tell us about your practice - What type of law do you practice?

| Do you have any experience in family law?                     | Yes No  | lf yes, please explain             |
|---|---------|------------------------------------|
| Please provide the name of a professional refe                | erence: |                                    |
| Are you currently a member of the Connecticu<br>Section 2-65? | -       | g in accordance with Practice Book |



The Volunteer Attorney Program will be held two Wednesdays a month from 9:00am to 11:00am at 90 Washington Street in Hartford. Please select (3) Wednesday dates below that you are available to serve as a volunteer attorney:

| 2016        |                  |             |                               |  |  |
|-------------|------------------|-------------|-------------------------------|--|--|
|             |                  | ovember 2nd | December 7th<br>December 21st |  |  |
|             | 20               | 017         |                               |  |  |
| January 4th | February 1st     | March 1st   | April 5th                     |  |  |
|             | May 3rd May 17th | June 7th    |                               |  |  |

I certify that the information that I have provided on this form is true and accurate to the best of my knowledge and belief.

Signature

Date signed

Please fax or email the completed form to Damon Goldstein at 860-263-2773 or <u>Damon.Goldstein@jud.ct.gov</u>. Please direct all questions to Damon Goldstein at 860-263-2734 or <u>Damon.Goldstein@jud.ct.gov</u>.