



DALLAS AREA PARALEGAL ASSOCIATION
2019 Student Membership Application

DAPA membership runs January 1st to December 31st

Federal Tax ID #75-1761575

Instructions: Complete, sign and date the application and submit it with a copy of your driver's license via email or regular mail as indicated below. Incomplete applications will not be accepted. Please type or print legibly.

Name: _____
(this name will appear on your membership certificate)

Home Address: _____

City, State, Zip: _____

Home Telephone: _____ Home Email: _____

Employer: _____

Work Address: _____

City, State, Zip: _____

Work Telephone: _____ Work Email: _____

Preferred Mailing Destination: Residence Business

Preferred E-Mail Destination: Residence Business

Preferred mailing information will be published in the online Membership Directory unless indicated otherwise: Publish My Information Do Not Publish

Name of School: _____

Address: _____
(Include City, State, Zip)

Registrar's Phone Number: _____ Name of Program: _____

Date Enrolled: _____ Anticipated Completion Date: _____

Name of Degree or Certificate to be Received: _____

Are you currently enrolled in a DAPA approved paralegal program? If you are not sure whether your program is on DAPA's list of approved programs, please check DAPA's website at www.dallasparalegals.org or contact the Executive Director for more information.

Are you interested in an NFPA Registered Paralegal (RP) or Core Registered Paralegal (CRP) study group?
YES _____ NO _____. If Yes, for which exam? _____

Please check which Specialty Sections interest you:

Animal Law Bankruptcy Collin County Corporate
 Criminal Law Family Law Government Intellectual Property
 Las Colinas Leadership/Management Litigation
 Medical/PI North Dallas Probate Real Estate Technology

The following are the current DAPA committees in which student members may participate. Please check which committees you would like to be a part of or about which you would like to receive informational emails:

Alliance Education Entertainment Newsletter
 NFPA Professional Development Pro Bono/ Community Service Programs
 Public Relations Publications

Are you interested in receiving Job Bank Information Emails? YES _____ NO _____

Have you worked as or are you currently employed as a paralegal? YES _____ NO _____

Are you interested in having a Mentor assigned to you? YES _____ NO _____

Have you ever been convicted of a felony or misdemeanor involving a crime of moral turpitude? YES _____ NO _____

Have you ever been convicted of a misdemeanor involving the unauthorized practice of law?
YES _____ NO _____

Have you ever been expelled or suspended from membership in a law related professional organization? YES _____ NO _____

Have you ever had a license or permit to practice in a profession revoked or suspended?
YES _____ NO _____

If so, please explain in detail (attach separate page if necessary):

Pursuant to Section 3.4 of DAPA's Bylaws, in the past year, have you been: (a) convicted of a felony or misdemeanor involving a crime of moral turpitude; (b) convicted of a misdemeanor involving the unauthorized practice of law ("UPL"); (c) expelled from or suspended from membership in a law-related professional organization; (d) had a license or permit to practice or engage in a profession or occupation suspended or revoked; (e) found by the Association to have engaged in conduct detrimental to the profession and/or the Association; or (f) violated the Code of Ethics adopted by the Association. YES _____ NO _____
If so, please explain in detail on a separate page.

(A criminal background check will be conducted on each applicant. A copy of your valid driver's license is necessary for verification purposes.)

CURRENT QUALIFICATIONS FOR STUDENT MEMBERSHIP

(c) **Student Member (Non-Voting).** A person eligible for student membership shall be any person who is enrolled and actively participating in an accredited baccalaureate, post-baccalaureate, or associate degree paralegal education program. Student members in good standing may participate in the affairs of the Association, but shall not have the right to vote, hold any office set forth in Article IV, Section 4.1, or Article VII, or serve as an officer/director, section chair or committee chair. Student members may not serve as members of the following standing committees: Job Bank, Rules and Bylaws, Ethics, Election or Scholarship. Student members are required to notify the Director-at-Large of any change in their educational status which directly affects membership requirements.

I hereby attest that I am enrolled and actively participating in an accredited baccalaureate, post-baccalaureate, or associate degree paralegal education program.

I understand that as long as I am a Student Member of DAPA, I may participate in the affairs of the Association, but shall not have the right to vote, hold any office set forth in Article IV, Section 4.1, or Article VII of the DAPA Bylaws, or serve as an officer/director, section coordinator or chairman of a committee.

I agree to be bound by the DAPA Bylaws and Code of Ethics incorporated herein. I understand any and all of the information I provide on my application may be confirmed by the Executive Director, the Director at Large, or a Student Membership Committee member. **I understand I must advise the Executive Director in writing of any change in my educational status, which may affect my membership status.**

Signature: _____ Date: _____

PAYMENT: Please enclose a check or money order payable to DAPA for \$65.00 along with a copy of your valid driver's license. This \$65.00 includes a nonrefundable \$10 application fee and \$25.00 of annual membership dues for membership in the National Federation of Paralegal Associations, Inc.

PLEASE DIRECT YOUR COMPLETED APPLICATION, PAYMENT, COPY OF DRIVER'S LICENSE AND COMPLETED STUDENT ENROLLMENT VERIFICATION FORM TO:

Mariela Cawthon, DAPA Executive Director
2100 Ross Avenue, Suite 2700
Dallas, TX 75201
or Email to executivedirector@dallasparalegals.org
Call (214) 284-0091 for questions
PLEASE USE MAIL OR EMAIL ONLY

You can also pay online with a debit or credit card on our website

STUDENT ENROLLMENT VERIFICATION FORM

(To be completed by school personnel)

This is to verify that _____ is a student in good standing
(student's name)

in the _____ program at _____.
(name of program) (name of school)

Name of School Administrator or Registrar: _____

Title: _____

Date: _____

(signature of school administrator/registrar)

DO NOT WRITE BELOW THIS LINE

Approving Committee Member Initials: _____

Approval Date: _____