

**VOLUNTEER LAWYERS PROJECT APPLICATION**  
**CIVIL COURT OF THE CITY OF NEW YORK**  
**111 CENTRE STREET, ROOM 1240**  
**NEW YORK, NEW YORK 10013**  
**[ 646] 386-5412**  
**[212] 374-5709 Fax**

Date: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: Office: \_\_\_\_\_

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

PHONE: Office \_\_\_\_\_ Home \_\_\_\_\_

FAX: Office \_\_\_\_\_ Home \_\_\_\_\_

E-MAIL: Office \_\_\_\_\_ Home \_\_\_\_\_

Admitted to Practice in \_\_\_\_\_ Year of Admission \_\_\_\_\_  
State jurisdiction

Practice/Specialty areas \_\_\_\_\_

Resource Center Preference: \_\_\_\_\_ Bronx (If more than one, indicate by number in order of preference)  
\_\_\_\_\_ Brooklyn  
\_\_\_\_\_ Manhattan  
\_\_\_\_\_ Queens

Prefer to assist:  Landlord  Tenant (Must choose one)

Mail preference:  Business  Home (sent to business unless otherwise stated)

How did you hear about the Volunteer Lawyers Project? \_\_\_\_\_

Have you participated in prior Volunteer Lawyer training sessions? If so, state session(s) and date(s) attended. \_\_\_\_\_

State hours available between 12 noon and 5:00 p.m. \_\_\_\_\_

Submit application to: Civil Court of the City of New York, 111 Centre Street, Room 1240, New York, NY 10013 or e-mail to [vlpcivil@courts.state.ny.us](mailto:vlpcivil@courts.state.ny.us).