



## South Dakota Paralegal Association, Inc.

Founded in 1989

*An Affiliate of the National Association of Legal Assistants, Inc.*

### MEMBERSHIP APPLICATION

Name: \_\_\_\_\_

Employer (or college if applying for student membership): \_\_\_\_\_

Office Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Office Telephone: \_\_\_\_\_ Office Fax: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Mailing Address: \_\_\_\_\_ Office \_\_\_\_\_ Home

***DUES STRUCTURE: Dues will be prorated according to the date of the application for membership as follows: 100% from January 1 to March 31, 75% from April 1 to June 30, 50% from July 1 to September 30, 25% from October 1 to December 31. Dues must accompany this application form.***

PLEASE CHECK MEMBERSHIP CLASSIFICATION FOR WHICH YOU ARE APPLYING:

1. **Active Member.** Dues \$65.00 annually. (Please also read the dues structure located on page 1.)

An individual who meets at least one of the following requirements, has a high school diploma or general equivalency diploma, has not been convicted of a felony, has not been disbarred or suspended from the practice of law, or has not been placed on temporary suspension from the practice of law is eligible for active membership. This is the only membership classification which carries voting privileges. Active members may serve as association officers, directors, or committee chairpersons. Please check all categories that qualify you for active membership.

- \_\_\_\_\_ a) Successful completion of the Certified Legal Assistant (CP) examination from NALA, Inc. (ATTACH copy of CP certificate); or
- \_\_\_\_\_ b) Graduation from an ABA approved program of study for legal assistants (ATTACH copy of the graduation certificate); or

- \_\_\_\_\_ c) Graduation from a course of study for legal assistants which is institutionally accredited, but not ABA approved, and which requires not less than the equivalent of 60 semester hours of classroom study (ATTACH copy of diploma or certificate); or
- \_\_\_\_\_ d) Graduation from a course of study for legal assistants other than those set forth in (b) and (c) above, plus not less than 6 months in-house training as a legal assistant, whose attorney-employer attests that such person is qualified as a legal assistant (ATTACH copy of graduation verification and see pages 3 & 4 for attestation); or
- \_\_\_\_\_ e) A baccalaureate degree in any field, plus not less than 6 months of in-house training as a legal assistant, whose attorney-employer attests that such person is qualified as a legal assistant (ATTACH copy of diploma and see pages 3 & 4 for attestation); or
- \_\_\_\_\_ f) Minimum of 3 years law-related experience under the supervision of an attorney, including at least 6 months of in-house training as a legal assistant, whose attorney-employer attests that such person is qualified as a legal assistant (see pages 3 & 4 for attestation); or
- \_\_\_\_\_ g) A minimum of 2 years of in-house training as a legal assistant, whose attorney-employer attests that such person is qualified as a legal assistant (see pages 3 & 4 for attestation).

2. **Associate Member.** Dues \$35.00 annually. (Please also read the dues structure located on page 1.)

An individual who endorses the legal assistant concept or is involved in the promotion of legal assistant profession and who meets the following qualifications:

- a) Membership in the State Bar of South Dakota; or
- b) Member of the legal assistant education field; or
- c) Member of the law office management field; or
- d) Any individual who has qualified in the past for active membership under Article IV, 2, but is not currently working in the legal field.

3. **Sustaining Member.** Dues \$65.00 annually. (Please also read the dues structure located on page 1.)

Law firms, corporations, organizations, legal assistant program representatives and other entities who endorse the legal assistant concept or are involved in the promotion of the legal assistant profession and who contribute dues as set by the Executive Committee.

4. **Student Member.** Dues \$20.00 annually. (Please also read the dues structure located on page 1.)

Student membership shall be open to any individual who meets and submits the following criteria:

- a) A student who is enrolled at any university, college, junior college, or other educational institution in a course of study as a legal assistant/paralegal and who has completed one-half of the required curriculum required for graduation from that program; and

b) Submits:

- (1) An attestation from the director of the program that the individual is a student in good standing (see page 4);
- (2) Proof of enrollment at their respective educational institution (see page 4) and
- (3) Verification of the courses completed (see pages 4 & 5).

Student members are required to reapply for membership each year. If a student member is eligible for active membership, he/she may not reapply for student membership.

<b>STATE BAR OF SOUTH DAKOTA</b>  <b>Definition of a Legal Assistant</b>  (Source: SDCL 16-18-34)  <b>Legal Assistants (also known as paralegals) are a distinguishable group of persons who assist licensed attorneys in the delivery of legal services. Through formal education, training, and experience, legal assistants have knowledge and expertise regarding the legal system, substantive and procedural law, the ethical considerations of the legal profession, and the Rules of Professional Conduct as stated in Chapter 16-18, which qualify them to do work of a legal nature under the employment and direct supervision of a licensed attorney. This rule shall apply to all unlicensed persons employed by a licensed attorney who are represented to the public or clients as possessing training or education which qualifies them to assist in the handling of legal matters or document preparation for the client.</b>	<b>AMERICAN BAR ASSOCIATION</b>  <b>Definition of a Legal Assistant</b>  (Source: 1997 ABA Annual Meeting)  <b>A legal assistant or paralegal is a person, qualified by education, training or work experience who is employed or retained by a lawyer, law office, corporation, governmental agency or other entity and who performs specifically delegated substantive legal work for which a lawyer is responsible.</b>
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**APPLICANT'S ATTESTATION**

I hereby apply for (check one) \_\_\_\_ ACTIVE, \_\_\_\_ ASSOCIATE, \_\_\_\_ SUSTAINING, \_\_\_\_ STUDENT membership in the South Dakota Paralegal Association, Inc., and enclose a check in the amount specified in payment of the initiation fee and annual dues. I understand that my application is subject to approval by the SDPA. I attest that:

- (a) I have read the definitions of a legal assistant as set forth above, and if I am applying for membership as an active member, I am a practicing legal assistant under the definitions;
- (b) I qualify for the membership under said definitions;
- (c) I have never been convicted of a felony;
- (d) I have never been disbarred or suspended from the practice of law in any jurisdiction;
- (e) I have not been placed on temporary suspension from the practice of law;
- (f) All information I have included in this application is true and complete;
- (g) I give my consent to SDPA to investigate my application and contact my present or former supervising attorney(s) and/or school(s) for verification or clarification of my qualifications for membership; and
- (h) I have received and read the Code of Ethics and Professional Responsibility of SDPA and NALA and the bylaws as adopted by SDPA and agree to be bound by the same. These can be located at [www.sdparalegals.com](http://www.sdparalegals.com).

Date: \_\_\_\_\_  
 \_\_\_\_\_  
 (Signature of Applicant)

**ATTORNEY-EMPLOYER ATTESTATION**

**Note: This section must be completed for all applicants applying for membership under requirements 1(d), 1(e), 1(g) or 4 on page 1.**

I hereby attest that:

- (a) I have read the definitions of a legal assistant set forth above, and if applicant is applying for membership as an active member, that applicant is a practicing legal assistant under said definitions;
- (b) Applicant has been employed by me for at least the requisite period of time and meets the qualifications for membership in the South Dakota Paralegal Association, Inc., as listed under requirement category \_\_\_\_\_;
- (c) Applicant performs substantial, in contrast to nominal or occasional, legal assistant services for me in my work as an attorney and I supervise the applicant's assistance; and
- (d) I recommend the applicant for membership in SPDA.

Date: \_\_\_\_\_  
 \_\_\_\_\_  
 (Signature of Attorney-Employer)

**PROGRAM DIRECTOR ATTESTATION**

**(Student Member Applicant Only)**

**Note: The following sections must be completed for all applicants applying for student membership.**

I hereby attest that:

- (a) I have read the qualifications for student membership and believe the applicant meets the qualifications for student membership in the South Dakota Paralegal Association, Inc.;
- (b) The attached documentation represents proof of the applicant's enrollment in the legal assistant/paralegal program at the following named institution; and
- (c) Applicant is a student in good standing in said legal assistant/paralegal program.

Name of Institution: \_\_\_\_\_

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

(Signature and Title)

**REGISTRAR ATTESTATION**

**(Student Member Application Only)**

I hereby attest that:

- (a) I have read the qualifications for student membership and believe the applicant meets the qualifications for student membership in the South Dakota Paralegal Association, Inc.;
- (b) Applicant has completed one-half (1/2) of the requirements for graduation from the legal assistant/paralegal program; and
- (c) The attached verification of courses completed by applicant satisfy one-half (1/2) of the requirements for graduation from said legal assistant/paralegal program.

Name of Institution: \_\_\_\_\_

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

(Signature and Title)

**(To be completed by Active and Associate Applicants only)**

1. Years of legal experience \_\_\_\_\_ 2. Years as legal assistant: \_\_\_\_\_ 3. Years at present job: \_\_\_\_\_

4. Education: For formal education, include name and address of school, date of graduation, and **attach** proof of graduation or training for present position (i.e., copy of diploma or certificate, and school verification of courses completed for active member qualification section c or student member qualification):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Your education meets membership qualifications from page 1 under requirement(s): b) c) d) e)
6. NALA member: \_\_\_\_\_ Yes \_\_\_\_\_ No
7. If CP, date certified: \_\_\_\_\_
8. If CLAS, date certified: \_\_\_\_\_ Other: \_\_\_\_\_
9. Check the most appropriate description of your employer:
- \_\_\_\_\_ Law department, nonprofit organization
- \_\_\_\_\_ Judicial agency, court
- \_\_\_\_\_ Corporate law department
- \_\_\_\_\_ Private law office consisting of \_\_\_\_\_ attorneys, \_\_\_\_\_ legal assistants, \_\_\_\_\_ non-lawyer personnel
10. Fields of law in which your legal assistance is concentrated. Please check every area in which you have worked:

- |                                  |                                 |                              |
|----------------------------------|---------------------------------|------------------------------|
| _____ Administrative/Management  | _____ Contract                  | _____ Oil, Gas & Mineral Law |
| _____ Administrative Law         | _____ Corporations/Partnerships | _____ Personal Injury        |
| _____ Admiralty/Maritime         | _____ Criminal Law              | _____ Products Liability     |
| _____ Antitrust                  | _____ Employee Benefits         | _____ Real Estate            |
| _____ Banking/Finance/Investment | _____ Estate Planning           | _____ Securities             |
| _____ Bankruptcy                 | _____ Family Law                | _____ Taxation               |
| _____ Business Law               | _____ Insurance                 | _____ Probate                |
| _____ Civil Litigation           | _____ Labor/Employment          | _____ Trusts                 |
| _____ Collections                | _____ Medical Malpractice       | _____ Workers Comp           |
| _____ Commercial Law             | _____ Municipal Law             | Other _____                  |

11. Of the fields you checked above, which three is your present work most concentrated in, and what are your major duties:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

12. Serving on a SDPA Committee is not mandatory, but is the best way to meet other SDPA members who share your same interests. Please indicate the committees in which you have an interest.

- \_\_\_\_\_ Audit \_\_\_\_\_ Library \_\_\_\_\_ Educational Programs

\_\_\_\_ Membership

\_\_\_\_ Public Relations

\_\_\_\_ Newsletter

\_\_\_\_ Finance

\_\_\_\_ Nominations/Elections

\_\_\_\_ Website

\_\_\_\_ Job Bank

\_\_\_\_ Professional Development

\_\_\_\_ Other \_\_\_\_\_

13. List any other local or national legal assistant organizations of which you are a member:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Why did you decide to join SDPA?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. List current professional or business organizations, other legal assistant organizations, of which you are a member:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Hobbies and outside interests: \_\_\_\_\_

\_\_\_\_\_

17. Name of spouse: \_\_\_\_\_ Spouse occupation: \_\_\_\_\_

18. Names and birth dates of children: \_\_\_\_\_

\_\_\_\_\_

19. SDPA Sponsor's Name and Address, if applicable: \_\_\_\_\_

\_\_\_\_\_

Thank you for your interest in becoming a member of SDPA. Please return the completed application, verification attachments for qualification, and your check to: **Jackie Schad, ACP, SDPA Membership Committee Chairperson, 4020 Jackson Blvd., Suite 1, Rapid City, SD 57702.**

**OFFICE USE ONLY:**

Date Received: \_\_\_\_\_ Amount \$ \_\_\_\_\_ Date Approved: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_