



Utah State Bar
Paralegal Division
645 South 200 East
Salt Lake City, UT 84111
801.531.9077
www.utahparalegals.org

Dear 2008-2009 Paralegal Division Member:

Julie L. Eriksson
Chair

Aaron Thompson
Chair Elect

Sharon M. Andersen
Ex Officio Director

Carma Harper
Director, Region I

Thora K. Searle
Director, Region II

Heather Finch
Director, Region III

Suzanne Potts
Director Region IV

Deb Caletory
Parliamentarian

Kimberly Cassett
Director-at-Large

J. Robyn Dotterer
Director-at-Large

Sanda Flint
Director-at-Large

Anna Gamangasso
Director-at-Large

Bonnie K. Hamp
Director-at-Large

Cheryl Jeffs
Director-at-Large

Karen McCall
Director-at-Large

JoAnna Shiflett
Director-at-Large

It's here again! That time of the year to **renew your membership in the Paralegal Division of the Utah State Bar for 2009-2010**. We are pleased that you are a member and look forward to your continuing membership. Members of the Paralegal Division are afforded the same benefits that are available to the Bar membership including the Bar Journal, access to counseling at Blomquist Hale with no charge, admittance to many of the Bar's various sections, free Brown Bag Seminars and various other low cost seminars. In addition Paralegal Division members are first to know about paralegal job announcements. Please check out the Paralegal Division's dynamic new website chock full of useful links, article and access to all of the Divisions activities.

The membership renewal period has changed from June to May. We hope that by moving the renewal period to this earlier date, membership renewal will run smoothly and timely. Your membership renewal packet is enclosed with this letter. Your renewal application and accompanying forms are **due on or before May 31, 2009**. If your application is postmarked after **June 1, 2009**, we will hold your renewal form until the next open membership period which will be January 1, 2010-January 31, 2010. Membership continues to run July 1-June 30th.

A few reminders while completing your application:

1. Please prepare a **separate check for each new paralegal application**. Renewals are fine to include as a group with other paralegals, but the **new membership applications** should be paid separately. And, here's why: If one of the applicants of a joint check requires any additional documentation to complete their application, then the other new applications will also be delayed since checks are not processed until new applications are approved. New membership applications can be obtained online at the Paralegal Divisions new website <http://utahparalegals.org>.

2. Please remember we no longer need copies of your CLE Certificates so please **do not send in copies of your CLE certificates**. Simply fill out and **sign** the enclosed certification of CLE for those earned from June 1, 2008 to June 30, 2009. Because of the change in membership renewal periods you may include any CLE that you anticipate receiving between May 1, 2009 to June 30, 2009 and we will verify attendance from registration lists from any listed events. This



would include events such as Paralegal Day on May 21, 2009 and the Paralegal Division's Annual Meeting on June 19, 2009.

It has been a great year with membership growth. Let's keep the momentum going and help to recruit new members. Work on getting some of your fellow paralegals to send in applications for membership so that you may enjoy events together! It is the goal of the Paralegal Division to increase membership.

The Board of Directors of the Paralegal Division and the entire membership values your membership. If you experience a financial hardship that impacts your ability to renew your membership, please confidentially contact either me, Julie Eriksson the Paralegal Division Chair or any of the directors. Depending upon your circumstance, the Board may be able to assist you to maintain your membership in the Paralegal Division.

Don't forget to complete the Committee Volunteer Form as a part of your renewal process! If you completed one in the past and haven't heard from anyone, we apologize and invite you to email or call any of the current Directors to volunteer your assistance. A listing of the Board of Directors can be found on the website. We look forward to your continuing membership.

Very truly yours,

THE PARALEGAL DIVISION BOARD OF DIRECTORS

Thora Searle

Julie L. Eriksson

Membership Chair

Chair

**UTAH STATE BAR 2009 - 2010
Paralegal Division Membership Renewal Form**

FOR OFFICE USE ONLY

For Office Use Only: Batch NO. _____ Control No. _____ Date Posted _____ Posted By _____

Member Information(Name): _____
 Bar Number: _____ Mail Preference: Business Residence

BUSINESS PHONE: _____ BIRTHDATE: ____/____/____
 mm / dd

BUSINESS ADDRESS _____ RESIDENCE ADDRESS _____

Preferred Email Address: _____
 Check only if the above information is incorrect and then make corrections on the back of this form

Name of Current Supervising Attorney (MANDATORY): _____

Attorney's Bar Number: _____ Check only if this information has changed from the last year

Voluntary Sections
 (Check appropriate box and add membership fee to total due)

Banking & Finance	___ \$15.00
Business Law	___ \$15.00
Collection Law	___ \$25.00
Constitution Law	___ \$20.00
Corporate Counsel	___ \$10.00
Criminal Law	___ \$15.00
Dispute Resolution	___ \$35.00
Family Law	___ \$30.00
Franchise Law	___ \$15.00
Intellectual Property	___ \$35.00
International Law	___ \$20.00
Labor & Employment	___ \$25.00
Litigation	___ \$25.00
Real Property	___ \$20.00
Securities	___ \$40.00
Tax	___ \$30.00

2009-2010 Fees & Membership Remittance

Mandatory Fees: (\$75.00)	\$75.00
Applications postmarked or received after 5/31/09 will not be processed	
<i>Next date for new or renewal applications to be accepted: 01/01/10 thru 01/31/10</i>	
Voluntary Fees:	
Section Membership Total:	\$ _____
TOTAL AMOUNT DUE:	\$ _____
<u>**DO NOT COMBINE PAYMENT WITH ATTORNEY RENEWALS**</u>	
<u>**DO NOT COMBINE RENEWALS AND NEW MEMBERSHIPS**</u>	

PLEASE NOTE: Paralegal Division members receive CLE notices from the Young Lawyers Division without cost.

Make checks payable to Utah State Bar or complete credit card information below. There will be a \$20 charge for returned checks.

DO NOT COMBINE PAYMENT WITH ATTORNEY RENEWALS
DO NOT COMBINE RENEWALS AND NEW MEMBERSHIPS IN ONE PAYMENT

Billing Address: _____ Zip Code: _____

(Circle One) MC / VISA / AMEX Account #: | | | | | | | | | | | | | | | | | | | | | |

Expiration Date: _____ Cardholder Signature: _____

**RETURN THIS FORM, ATTORNEY AFFIDAVIT, CLE CERTIFICATION AND REMITTANCE TO:
 UTAH STATE BAR, PARALEGAL DIVISION at 645 South 200 East, Salt Lake City, UT 84111-3834**

**Paralegal Division
Committee Volunteer Form
2009-2010**

Name: _____

Paralegal Division Membership No.: _____

Telephone:() _____

Fax: () _____

E-Mail: _____

Return to:

Julie L. Eriksson
Paralegal Division Chair
c/o Christensen & Jensen, P.C.
15 West South Temple, Ste 800
Salt Lake City, Utah 84101
Telephone: (801) 323-5000
Facsimile: (801) 323-9037

Committees and Projects		Preference (Indicate order of preference- 1 st , 2 nd , 3 rd , etc.)
Education/CLE Committee		
Specific CLE Events	Bar's Spring Convention	
<i>Select specific events if you are not available to assist with all events on the CLE Committee</i>	Bar's Annual Mtg.	
	Fall Forum	
	Brown Bags	
	Paralegal's Day	
Division Annual Meeting, i.e. Elections		
Membership		
Marketing and Publications		
Specific M & P areas	Website/Blog	
	Write an article for the Bar Journal	
Utilization-Includes Salary Survey		
Ethics		
Long-Range Planning		
Professional Standards (CLE and Credentials)		
Paralegal of the Year Committee		
Community Service Committee		
<i>Select specific events if you are not available to assist with all events on the Community Service Committee</i>	Law Day and 5K	
	"And Justice for All"	
	Woman's Professional Clothing Drive	
	YLD "Wills For Heroes"	
Other (Please indicate)		
I am available for:	Salt Lake County St. George/Cedar City Central Utah/Provo and South Northern Utah/Davis County Park City/Northeast	

FORM A. APPLICANT GENERAL INFORMATION*
(Please print or type)

Name: Mr. () Ms. () Mrs. () _____

Employer: _____

Preference for receiving mailings from Paralegal Division: Office () Home ()

Office Address: _____

Office Phone: _____ Office Fax: _____

E-mail (optional): _____ Birth date: _____
mm/dd

Home Address: _____

Home Phone: _____ Home Fax: _____

E-mail (optional): _____

Practice Area(s): _____

*The name, business address, business fax and telephone, and practice area information may be published in a membership directory. The remaining information will be confidential.

FORM C. AFFIDAVIT OF FORMER SUPERVISING ATTORNEY

STATE OF UTAH)
) :ss.
COUNTY OF _____)

_____, being first duly sworn, deposes and states:
[Print Attorney's Name]

- 1. I am an attorney duly licensed to practice law in the State of Utah;
- 2. I read the "Definition of a Paralegal" adopted by the Utah Supreme Court and the Board of Bar Commissioners set forth below:

A legal assistant or paralegal is a person, qualified through education, training or work experience, who is employed or retained by a lawyer, law office, governmental agency, or other entity in a capacity or function which involves the performance, under the ultimate direction and supervision of an attorney, of specifically delegated substantive legal work, which work, for the most part, requires a sufficient knowledge of legal concepts that, absent such an assistant, the attorney would perform the task.

- 3. I hereby certify that _____, the Applicant, is a paralegal and worked under my ultimate supervision in the performance of specifically delegated legal work consistent with the "Definition of a Paralegal" in paragraph No. 2 above for the period from _____ to _____.

Signature of Attorney
Bar Number _____

Subscribed, sworn to and acknowledged before me this _____ day of _____, 20____.

Notary Public
Residing at: _____

My Commission expires:

FORM C. AFFIDAVIT OF CURRENT SUPERVISING ATTORNEY

STATE OF UTAH)
) :ss.
COUNTY OF _____)

_____, being first duly sworn, deposes and states:
[Print Attorney's Name]

1. I am an attorney duly licensed to practice law in the State of Utah;
2. I read the "Definition of a Paralegal" adopted by the Utah Supreme Court and the Board of Bar Commissioners set forth below:

A legal assistant or paralegal is a person, qualified through education, training or work experience, who is employed or retained by a lawyer, law office, governmental agency, or other entity in a capacity or function which involves the performance, under the ultimate direction and supervision of an attorney, of specifically delegated substantive legal work, which work, for the most part, requires a sufficient knowledge of legal concepts that, absent such an assistant, the attorney would perform the task.

3. I hereby certify that _____, the Applicant, is a paralegal and works under my ultimate supervision in the performance of specifically delegated legal work consistent with the "Definition of a Paralegal" in paragraph No. 2 above for the period from _____ to the present, and that I remain responsible for the Applicant's work product.
4. I understand that the Applicant's membership in the Paralegal Division of the Utah State Bar is conditioned upon the Applicant's continued employment by a supervising licensed Utah attorney. I agree to notify the Division should the Applicant's employment by me terminate at any time within one year of the date of this affidavit.

Signature of Attorney
Bar Number _____

Subscribed, sworn to and acknowledged before me this _____ day of _____, 20____.

Notary Public
Residing at: _____

My Commission expires:

**FORM C. AFFIDAVIT OF CURRENT SUPERVISING ATTORNEY
FOR FREELANCE PARALEGAL**

STATE OF UTAH)
) :ss.
COUNTY OF _____)

_____, being first duly sworn, deposes and states:
[Print Attorney's Name]

1. I am an attorney duly licensed to practice law in the State of Utah;
2. I read the "Definition of a Paralegal" adopted by the Utah Supreme Court and the Board of Bar Commissioners set forth below:

A legal assistant or paralegal is a person, qualified through education, training or work experience, who is employed or retained by a lawyer, law office, governmental agency, or other entity in a capacity or function which involves the performance, under the ultimate direction and supervision of an attorney, of specifically delegated substantive legal work, which work, for the most part, requires a sufficient knowledge of legal concepts that, absent such an assistant, the attorney would perform the task.

3. I hereby certify that _____, the Applicant, is a paralegal and works under my ultimate supervision in the performance of specifically delegated legal work for the period from _____ to the present, and that I remain responsible for the Applicant's work product.
4. I understand that the Applicant's membership in the Paralegal Division of the Utah State Bar is conditioned upon the Applicant's continued employment by a supervising licensed Utah attorney. I agree to notify the Division should the Applicant's employment by me terminate at any time within one year of the date of this affidavit.

Signature of Attorney
Bar Number _____

Subscribed, sworn to and acknowledged before me this _____ day of _____, 20_____.

Notary Public
Residing at: _____

My Commission expires:

PARALEGAL DIVISION OF THE UTAH STATE BAR
CONTINUING LEGAL EDUCATION (CLE)
CERTIFICATE OF COMPLIANCE

Member Name: _____

Bar Number: _____

Telephone Number: () _____

Email Address: _____

PLEASE NOTE: Your signature is required on the second page of this certification.

A minimum of ten (10) CLE hours, with one-hour of Ethics, is required for renewal of your membership in the Paralegal Division. Please keep proof of CLE attendance in your files. We reserve the right to request copies of proof, however, **DO NOT** send proof with this Certificate of Compliance. *NOTE: If you have a problem meeting the CLE requirement for a particular renewal period, please submit your written statement of explanation for not meeting the requirement. We **may** be able to work with you to maintain your membership status for a limited time-period if your circumstance is beyond your control.*

Date of CLE	Sponsored By	Title of Program	Number of CLE Hours	Number of Ethics Hours
-----	-----	TOTAL HOURS FROM CONTINUATION SHEET (if applicable)		
-----	-----	TOTAL HOURS FOR PERIOD		

July 2008

IF NECESSARY PLEASE CONTINUE TO NEXT PAGE. IF NOT, PLEASE SIGN CERTIFICATION AND DATE AT THE BOTTOM OF NEXT PAGE.

