



Request for Legal Assistance
(Nonprofit Information Form for updating purpose)

This form will help Pro Bono Partnership of Atlanta learn more about your organization and its legal needs. Please download this form and save it to your computer. Once it is completed, please save the copy of the completed form and then email it, along with a copy of your 501(c)(3) letter from the IRS, to RLA@pbpatl.org. You may also attach a brochure or additional information about your organization, if desired.

Given our limited capacity, we cannot accept every applicant as a client. We consider the overall sustainability of the organization in making these decisions. Incomplete requests will not be reviewed.

Legal Name of Organization:

Trade Name or DBA if applicable:

Address:

City:

State:

Zip Code:

County:

Organization phone:

Name of Contact Person:

Title:

How long have you held this position?:

Phone:

Email:

Website:

Provide your organization's Mission Statement:

What is your organization's annual budget for the current year?:

What are the total gross receipts/revenues from the most recent fiscal year?:

State of Incorporation:

EIN Number:

Date of Incorporation:

Date of IRS Tax Exemption:

Please describe how your organization serves low-income and disadvantaged individuals:

Please list your organization's service areas (for example, Literacy, Childcare, and Housing/ Shelter):

Where does your nonprofit serve? Please pick the choice that fits best.

City of Atlanta
Metropolitan Atlanta
(23 counties)
Outside of Atlanta

Statewide
National Organization

Outside U.S.
If so, name the country:

About how many people does your organization currently serve?

of volunteers:

of independent contractors:

of staff:

Please tell us where you heard about the Pro Bono Partnership of Atlanta:

of board members:

How often does your board meet?:

Board Chair Name:

Board Chair Email:

Board Chair Phone:

Names of Board

Members:

Is there a line item on your budget for legal fees?:
If yes, how much?

Please describe the specific kinds of legal assistance you now need or anticipate needing in the future:

Please provide the name and affiliation of any lawyer that is now helping your organization or has helped your organization in the past five years, briefly describing the services provided. **Also indicate if the services were provided pro bono or for a fee.**

Please provide the name, telephone number, and affiliation of any attorney(s) that sit on the organization's board of directors.

***** Please attach the most recent copy of your 501(c)(3) letter from the IRS. You may also attach a brochure or additional information about your organization, if desired.**

If, after we review your application, we determine that we would like to move forward with the screening process.

Check out our website at www.pbpatl.org for free resources including articles and webcast recordings. Upon receipt of this application, we will add the Contact Person's email address to our mailing list for our Nonprofit Notes Newsletter with legal alerts and information about upcoming education opportunities.