

**APPOINTMENT RESPONSE FORM**

Pursuant to Section 1(c) of the Pilot Pro Bono Program (“Program”), any attorney who has indicated that he/she is willing to take on specified pro bono representation shall return the following form within thirty (30) days after accepting the appointment. The form shall be returned to the designated Pro Bono Liaison. THE FORM SHALL NOT BE FILED ELECTRONICALLY OR SENT TO ANY JUDGE ASSIGNED TO THE CASE. Upon receipt of the form, an order of appointment will issue if representation is accepted. If representation is not accepted, the case will be removed from the Program.

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Please check all that apply:

\_\_\_ Representation of \_\_\_\_\_ [litigant/client name] for all purposes is accepted.

\_\_\_ Representation of \_\_\_\_\_ [litigant/client name] for the limited purpose of \_\_\_\_\_ is accepted.

\_\_\_ Undersigned counsel has conferred with \_\_\_\_\_ [litigant/client], who has indicated agreement to representation for the purposes identified herein.

\_\_\_ Undersigned counsel has entered into a contingency agreement or other arrangement with \_\_\_\_\_ [litigant/client name]. In the event of a contingency agreement or other fee arrangement, the undersigned acknowledges that this case is not eligible for prepayment or reimbursement of costs under the Pro Bono Program Rules.

\_\_\_ Undersigned counsel has conferred with \_\_\_\_\_ [litigant/client], who has indicated that [he/she] does not agree to representation for the purposes identified herein.

[Signature of Pro Bono Counsel]  
[print name]  
[Address]  
[Contact Information]  
[Date]