



INITIAL APPLICATION
Employed Legal Assistants in King County 2020

Personal Contact Information

Name: _____
Work Email: _____
Phone Number: _____

Current Employer Information

Firm/Company: _____
Address: _____
Phone Number: _____
Firm Web Address: _____
Sponsoring Attorney: _____
Attorney Email: _____

Description of Current Position

Have you been employed at this office for longer than six months? YES___ NO___
(If you have not been employed longer than six months you will not be issued your card until you've hit the six month point.)

Have you had the same supervising attorney for six months or more? YES___ NO___
(If you have not had the same supervising attorney for six months you will not be issued your card until you've hit the six month point.)

Education Background

Please fill out as many as needed including other courses/seminars directly related to your position. If you do not hold an AA degree, or higher, you must have completed at least 1 ethics course and 1 course pertaining to your legal field (two separate courses). Attach documentation of your participation in each course. If completed online include a receipt or some documentation showing confirmation of being signed up for the course.

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School/University: _____

Degree/Certificate*: _____

Dates of Attendance: _____

School/University: _____

Degree/Certificate*: _____

Dates of Attendance: _____

**Attach a copy of certificate.*

Work Experience

Please list your previous positions in the legal field. You may bypass this step by attaching a current resume.

Employer: _____

Supervisor: _____

Supervisor Phone#: _____

Position: _____

Description/Duties: _____

Dates of Employment: _____

Employer: _____

Supervisor: _____

Supervisor Phone#: _____

Position: _____

Description/Duties: _____

Dates of Employment: _____

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Checklist of Documents

- ___ Initial Application
- ___ Letter of recommendation from your Responsible Attorney(s)
- ___ Copy of degree/school certificate **OR** proof of participation in legal education courses
- ___ Affidavit of Applicant
- ___ Affidavit of the Responsible Attorney(s)
- ___ Registration fee of \$35.00

Payment Information

Total Due:

Check (*Checks payable to KCBA*)

Check Number: _____ Check Amount: _____

Credit Card

Type of Card Visa MC Amex

Card Number: _____

Expiration Date: _____ CVV: _____

Name on Card: _____

King County Bar Association Legal Assistant Committee

Application Received _____

Application Reviewed _____

Application Approved _____

Frances Turean, Legal Assistant Committee Chair

Please mail your completed applications to:

King County Bar Association
Attn: Camille Zahajko
1200 5th Ave, Suite 700
Seattle, WA 98101

Any questions can be emailed to CamilleZ@kcba.org.

Typical turnaround time is a week.