



RENEWAL APPLICATION
Employed Legal Assistants in King County 2020

Personal Contact Information

Name _____

Work Email _____

Work Number _____

Employer/Sponsoring Attorney Information

Firm/Company _____

Address _____

Phone Number _____

Firm Web Address _____

Sponsoring Attorney _____

Attorney Email _____

Description of Current Position

Have you been employed at this office longer than six months? ____Yes ____No

Have you had the same supervising attorney six months or more? ____Yes ____No

If you answered no to either, but have been a member of the Legal Assistant registration program for several years you can submit a waiver request. Additionally you'll need to submit (1) a written request waiver from your new responsible attorney and (2) a letter of recommendation from the responsible attorney at your previous law firm. If you do not qualify for a waiver, you will not be issued your card until you've hit the six month point.

1. I hereby apply to continue my registration as a legal assistant with the King County Bar Association. In submitting this application, I affirm that there have been no material changes in my employment status, and that my Responsible Attorney has not changed. Enclosed is payment to cover the cost of processing this renewal.

2. I know of no circumstances which would adversely change the information stated in my original application and I continue to work as a legal assistant as generally stated in the original application, performing tasks under the supervision of a lawyer and while I do not give legal advice, I have special training by experience and/or education to carry on investigative and information gathering matters, (use independent judgment, and deal with clients in a professional and ethical manner) under the supervision of the lawyer for whom I work and to whom I am responsible at all times.

Signature _____ Date _____

Printed Name _____

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Checklist of Documents

Name of applicant: _____

- ____ Renewal Application
- ____ Copy of last year's Legal Assistant Registration Card
- ____ Registration fee of \$35.00
- ____ *Affidavit of Applicant
- ____ *Letter of recommendation from your new responsible attorney(s)
- ____ Affidavit of new Responsible Attorney(s) *(Include if a change in supervising attorney)

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.