

**ESSEX COUNTY BAR ASSOCIATION
MENTOR PROGRAM
2013-2014**

(PLEASE PRINT)

NAME: _____

FIRM: _____

ADDRESS: _____

PHONE: _____ **FAX:** _____

EMAIL: _____

In what areas of law do you feel proficient in providing mentoring assistance?

- | | |
|---|---|
| <input type="checkbox"/> Banking/Finance | <input type="checkbox"/> Immigration |
| <input type="checkbox"/> Bankruptcy | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> BBO Trial/Ethics | <input type="checkbox"/> Medical Malpractice |
| <input type="checkbox"/> Civil Litigation | <input type="checkbox"/> Motor Vehicle Negligence |
| <input type="checkbox"/> Civil Rights | <input type="checkbox"/> Municipal Law |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Negligent Security |
| <input type="checkbox"/> Contracts | <input type="checkbox"/> Premises Liability |
| <input type="checkbox"/> Corporate | <input type="checkbox"/> Probate |
| <input type="checkbox"/> Criminal | <input type="checkbox"/> Product Liability |
| <input type="checkbox"/> Discrimination | <input type="checkbox"/> Real Estate Closings |
| <input type="checkbox"/> Elder Law | <input type="checkbox"/> Wrongful Termination |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Zone/Board of Appeals |
| <input type="checkbox"/> Family | |

Please return your completed application to:
Essex County Bar Association
Shetland Office Park
45 Congress St., Ste. 4100
Salem, MA 01970
Phone: 978.741.7888 Fax: 978.741.1348