



MEMBERSHIP APPLICATION

ACTIVE MEMBER. Active membership is open to any individual who meets at least one of the following qualifications. This is the only membership classification which carries full voting privileges. Active members are also the only SCUPA members who may serve as association officers or committee chairmen.

QUALIFICATIONS:

1. Any individual who has successfully completed the Certified Paralegal (CP) examination of NALA, or
2. Any individual who has graduated from an ABA approved program of study for Paralegals, or
3. Any individual who has graduated from a course of study for Paralegals which is institutionally accredited but not ABA approved, and which requires not less than the equivalent of 60 semester hours of classroom study, or
4. Any individual who has graduated from a course of study for Paralegals other than those set forth in 2 and 3 above, plus not less than six months of in-house training as a Paralegal, whose attorney-employer attests that such person is qualified as a Paralegal, or
5. Any individual who has received a baccalaureate degree in any field, plus not less than six months in-house training as a Paralegal, whose attorney-employer attests that such person is qualified as a Paralegal, or
6. Any individual who has a minimum of three (3) years of law-related experience under the supervision of an attorney, including at least six months of in-house training as a Paralegal, whose attorney-employer attests that such person is qualified as a Paralegal, or
7. Any individual who has a minimum of two-years of in-house training as a Paralegal, whose attorney-employer attests that such person is qualified as a Paralegal.

ASSOCIATE/SUSTAINING MEMBER. Associate membership is open to any individual who meets at least one of the following qualifications.

1. Those members of the Bar Association endorsing the Paralegal concept or involved in the promotion of the Paralegal profession, or
2. Those members of the education field endorsing the Paralegal concept or involved in the promotion of the Paralegal profession, or
3. Those persons directly involved in the supervision of Paralegals.

Sustaining membership is available to those individuals and Paralegal program representatives who endorse the Paralegal concept or are actively involved in the promotion of the Paralegal profession who contribute annual dues or any amount in excess of those dues.

STUDENT MEMBER. Student Membership is open to any individual who is enrolled as a student (full-time or part-time) in any college, junior college or any other school pursuing a course of study as a paralegal ("Student Member"). A full-time student shall be defined as an individual enrolled for a minimum of 12 semester hours or equivalent provided the individual is not employed as a paralegal. A part-time student shall be defined as an individual who is enrolled in at least one paralegal class and has completed a minimum of 12 semester hours in any college, junior college or any other school pursuing a course of study as a paralegal. Provided, however, that SCUPA reserves the right to review the curriculum applicable to any prospective student member to determine if, in its sole discretion, such curriculum meets its minimum criteria.

A full or part-time student may be considered for membership upon written recommendation of the head of the paralegal study program. Such recommendation must be in writing and is in addition to the department head signature on the membership application.

CORPORATE MEMBER. Corporate membership is available to law-related or other businesses that wish to be associated with SCUPA. This membership will allow multiple individuals employed by the business to attend monthly luncheons at the member rate. This membership also includes your business logo on SCUPA's vendor page at www.scupa.org.



DUES STRUCTURE

First year's dues must accompany application form. Thereafter, dues are payable in the month of January.

Active and Sustaining Members: \$75.00 annually (Active is defined as an individual employed in the paralegal/legal assistant profession; Sustaining is defined as an individual in the legal field who wishes to be associated with SCUPA)

Student Members: \$25.00 annually. (If application is submitted after July 1, \$25.00 dues will cover the remainder of that year and the following calendar year. Reduced rate is only available one time.)

Corporate Members: \$150.00 annually (Corporate members are legal-related or other businesses that wish to be associated with SCUPA. This membership will allow multiple individuals employed by the business to attend monthly luncheons at the member rate. This membership also includes your business logo on SCUPA's vendor page at www.scupa.org)

ALL ACTIVE AND STUDENT MEMBERSHIP APPLICANTS MUST ATTACH A CURRENT RESUME

TO BE COMPLETED BY ALL APPLICANTS

I hereby apply for Active Student Sustaining Corporate (SELECT ONE) membership in the South Carolina Upstate Paralegal Association. I agree to be bound by the Code of Ethics and Professional Responsibility and the Bylaws as adopted by the South Carolina Upstate Paralegal Association as an affiliate of the National Association of Legal Assistants, Inc.

I further understand that this application is subject to approval by the South Carolina Upstate Paralegal Association.

Date _____ Signature: _____

Please return completed form along with dues to:

South Carolina Upstate Paralegal Association.
P.O. Box 10491
Greenville, South Carolina 29603
Attention: Membership Vice-President

ACTIVE MEMBERSHIP APPLICATION

Name: _____ Preferred Phone: _____

Home Address: _____

Employer _____ Office Phone: _____

Business Address: _____

Birthday (MM/DD): _____ Preferred Email: _____

How long have you been employed as a Paralegal? _____ years/months (Circle One)

Do you have a Degree? ___ Yes ___ No If Yes, what type? ___ Associate's ___ Baccalaureate ___ Graduate (Select all that apply)

Please tell us the name of any formal or special education (name and address of school) or training you have received for your present position: _____

Date of graduation: _____ If you have obtained your CP, date certified: _____

My employer is a ___ Private Law Office ___ Corporate Law Department ___ Other

(If Other, Please Describe) _____

Specialty Area(s): _____

Please circle which qualification number for Active Membership you are applying under. See Page 1 of this Membership Application.

1 2 3 4 5 6 7

ATTORNEY/EMPLOYER ATTESTATION.

Note: This section must be completed by all applicants qualifying under requirements numbered 4, 5, 6, and 7.

I hereby attest that _____ is employed by me and meets the qualifications for active membership in the South Carolina Upstate Paralegal Association as listed under requirement number _____.

Date _____

Name (Please Print) _____

Signature: _____

ALL ACTIVE AND STUDENT MEMBERSHIP APPLICANTS MUST ATTACH A CURRENT RESUME

STUDENT MEMBERSHIP APPLICATION

Name: _____ Preferred Phone: _____

Mailing Address: _____

School Attending: _____ Expected Date of Graduation: _____

Email: _____ Date of Birth: _____ (MM/DD)

SCHOOL ATTESTATION.

Note: This section must be completed by all student applicants and must be completed by school program director or instructor.

I hereby attest that _____ is currently enrolled in the Paralegal course at this school and is not employed as a Paralegal.

Date: _____

Name (Please Print): _____

Signature: _____

Title: _____

ALL ACTIVE AND STUDENT MEMBERSHIP APPLICANTS MUST ATTACH A CURRENT RESUME



SUSTAINING MEMBERSHIP APPLICATION

Name: _____ Preferred Phone: _____
Home Address: _____
Employer _____ Office Phone: _____
Business Address: _____
Preferred Email: _____

CORPORATE MEMBERSHIP APPLICATION

Business Name: _____
Telephone: _____ Fax: _____ Email: _____
Business Address: _____
Business website: _____

MEMBERSHIP PROFILE

NAME: _____

EMPLOYER OR SCHOOL: _____

EDUCATION: _____

STUDENTS: Expected Date of Graduation: _____

SPECIALTY AREA(S): _____

NO. OF YEARS WORKING AS A PARALEGAL: _____

NO. OF YEARS AS A MEMBER OF SCUPA: _____

COMMITTEES YOU MAY BE INTERESTED IN SERVING FOR SCUPA. PLEASE SELECT **AT LEAST ONE**.

_____ Seminars/Legal Education

_____ Law Week

_____ Brochure

_____ Bar Liaison

_____ Job Bank

_____ Mentor

_____ Scholarship

_____ Publications

_____ Speakers' Bureau

_____ Public Relations

_____ Sunshine/Social

_____ Pro Bono/Charity

WOULD YOU BE INTERESTED IN SPEAKING AT ONE OF OUR SCUPA MEETINGS?

_____ YES _____ NO _____ MAYBE

TOPIC(S): _____

IS THERE SOMEONE YOU KNOW WHO MAY BE INTERESTED IN SPEAKING AT ONE OF OUR SCUPA MEETINGS?

_____ YES _____ NO _____ MAYBE

NAME: _____

PHONE: _____

TOPIC(S): _____

ADDITIONAL COMMENTS: _____

PLEASE RETURN WITH COMPLETED MEMBERSHIP APPLICATION AND DUES PAYMENT.