

*For internal use only:*

Date received \_\_\_\_\_\_/\_\_\_\_\_\_/20\_\_\_\_

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**NAME OF ORGANIZATION** (Print Name)

**🞏 Yes 🞏 No** Has your group previously applied for services through Texas CBAR?

**Application for Pro Bono Referral**

Texas Community Building with Attorney Resources ([Texas CBAR](http://www.texascbar.org/)) is a free statewide program that matches eligible Texas nonprofit groups with pro bono attorney volunteers. We do not assist individuals. As a special project of [Texas RioGrande Legal Aid](http://www.trla.org/), Texas CBAR must adhere to certain group eligibility guidelines.

**The following matters or groups are not eligible for Texas CBAR group services:**

* ***No litigation*.** We cannot assist groups with matters involving potential or active litigation (bringing or defending a lawsuit or a threatened lawsuit).
* ***Groups that work outside of the U.S.***The group must assist low-income Texans. Groups whose work benefits individuals outside of the US are ineligible. Established nonprofits incorporated in another state wishing to expand charitable operations to Texas may be eligible.
* ***Churches, schools, booster clubs, amateur sports organizations.*** Entities such as churches or schools, including public, private, charter, or church-based schools, are not eligible. Affiliated organizations, such as a food pantry or church ministry, may be eligible. We do not have the capacity to serve school booster clubs, PTAs, PTOs, or amateur sports organizations.
* ***Foundations.*** Groups that provide financial support to other groups or charities (such as a foundation) are not eligible. Read more about foundations from the [IRS.](https://www.irs.gov/charities-non-profits/private-foundations/types-of-foundations)

**Note:** *Turnaround time and tight deadlines*–Please be aware that the process of evaluating your matter for eligibility and the subsequent referral process *may take 2-6 weeks or longer.*

The information in this Application is confidential. Check “yes” or “no” to each, do not leave blank.

**🞏 Yes 🞏 No** **Does your group lack the funds to retain private counsel?**

**🞏 Yes 🞏 No** **Does your group, have, as a principal activity, the delivery of services to low income individuals or communities**? (Note - it need not be the *only* activity).

**If YES**, describe how your group benefits low-income individuals or communities:

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**🞏 Yes 🞏 No Does your group deliver services primarily to persons who are U.S. citizens, and/or those lawfully present in the U.S.?**

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| --- | --- | --- | --- |
| **To avoid delays in processing your Application, please answer all sections and questions fully and completely.**  **PART 1. CLIENT INFORMATION** | | | |
| Contact person for Application (must be ED, Officer, Director or Founder) | | Title with group | |
| Group mailing address | | Best tel. no. to reach contact person  Is this a cell? 🞏 | |
| Group main phone | | Email for contact person: | |
| Group website/social media: | | Employer Identification Number (EIN) if any: | |
| **Charitable purposes** as stated in your incorporation documents, bylaws, or IRS Application for Exemption *(for startups, use your proposed mission statement/intended charitable purposes)* | | | |
| What **community or geographic region** does your group currently serve or plan to serve? (ex. South Dallas, Grimes County)? | | | |
| Does your group have **bylaws?** …………………………………………………………………………………  If yes, have your bylaws been reviewed or updated in the past 5 years?...............  Is group incorporated as a nonprofit with the **Texas Secretary of State?..................**  If Yes, date of Incorporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Is your group a **tax-exempt nonprofit under IRC Section 501(c)(3)?**..........................  If Yes, date of IRS Determination Letter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Is your group **current on last 3 years of IRS Form 990** annual returns?.....................  Does your group have employees? …………………………………………………………………………..  If so, how many: part time \_\_\_\_\_\_\_\_\_ full time \_\_\_\_\_\_\_  Does your group use volunteers? ……………………………………………………………………………..  Does your group use independent contractors?..........................................................  Does your group work *primarily* with: (check all that apply):  🞏 Individuals with physical or intellectual disabilities 🞏 Veterans  🞏 Minor children 🞏 Survivors of sexual assault, domestic abuse or human trafficking  🞏 Elderly 🞏 Ex-offenders/re-entry populations 🞏 Disaster survivors  🞏 Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Approximate number of persons annually served by organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | 🞏 Yes 🞏 No  🞏 Yes 🞏 No  🞏 Yes 🞏 No  🞏 Yes 🞏 No  🞏 Yes 🞏 No  🞏 Yes 🞏 No  🞏 Yes 🞏 No  🞏 Yes 🞏 No |
| **PART 2. ORGANIZATIONAL BACKGROUND AND STRUCTURE** | | | |
| **Board of Directors:** Please list all of the Directors/Officers who *currently serve or will serve* on the Board of Directors. Texas law *requires* a minimum of 3 directors, including a President and Secretary, who cannot be the same person. *We cannot review/refer your matter if this section is blank.*  President \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Secretary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Officer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(If more, include on separate sheet).*  Are any of the above related to one another? *(“related” = includes brother, sister, ancestor, descendant, spouse, brother-in-law, sister-in-law, son-in-law, daughter-in-law, mother-in-law, or father-in-law of any board member; child or grandchild of board member or board member’s spouse).* 🞏 Yes 🞏 No | | | |
| **PART 3. LEGAL NEEDS** | | | |
| Group needs legal assistance with (check all that apply): | | | |
| * Incorporation as a nonprofit * Application for IRS tax- exempt status * Review of existing bylaws | * Draft of bylaws (Group does not have bylaws) * Review and advise on an existing, contract, agreement, or MOU * Draft or create a specific contract, agreement, or MOU | | |
| * Other legal assistance needed (please describe): | | | |
| **Deadlines**: Please list urgent deadlines and reason. *Reminder:* matters that involve pending or threatened litigation, or criminal matters, are ineligible. | | | |
| **PART 4. FINANCIAL INFORMATION** | | | |
| Please attach current financial statement or 990.  Current income and assets: $\_\_\_\_\_\_\_\_\_\_\_\_\_ Current outstanding obligations and expenses: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_  How does your organization raise funds? 🞏 Grants 🞏 Donations 🞏 Fundraising activities | | | |
| **PART 5. CONFLICTS OF INTEREST** | | | |
| We are required to screen for potential conflicts. Please list the names of *other* individuals, organizations or parties involved in the transaction for which you seek legal assistance (e.g. other nonprofit, business, government agency, individual, or other entity). List even if you are unsure of the type or level of involvement in your matter.  1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **PART 6. APPLICATION CHECKLIST** | | | |
| ***We cannot review your legal matter without copies of your legal documents.*** Include digital copies (not originals) of relevant documents , along with this Application, to the contract information listed in “Next Steps” below:   * This Application * Group documents, if any (certificate of formation, bylaws, and amendments) * Current financial information (current financial statement/ or most recent IRS Form 990, 990-EZ, or 990-N) * IRS determination letter (if tax exemption granted) * Documents related to current matter for which you seek legal assistance (bylaws, contract, etc.) * Start-up organizations -organizational documents (if any), names of at least 3 board members, current/projected budget, detailed description of activities in furtherance of charitable or educational purposes, and how the group intends to raise money to carry out its activities. * Other documents related to legal services sought ( please list):   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

**Acknowledgment**

**Certification and Verification:** I certify that that I am authorized by the above group to submit this Application to Texas CBAR. I further certify all of the information in this Application is true, correct, and complete. I agree to notify Texas CBAR of any changes to the information contained in this Application. I further acknowledge that Texas CBAR has the right to reject any application or to withdraw from pro bono services any group that submits false or inaccurate information, or that fails to notify us of circumstances that may affect eligibility.

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Signature Title with organization

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name Date

**Next Steps**

**Please return this completed Application and supporting documents by email attachment to** [**texascbar@trla.org**](mailto:texascbar@trla.org)**, by mail to Texas CBAR, 4920 N. IH-35, Austin Texas 78751, or by fax to 512.447.3940.** We will confirm receipt of the application and inform you if additional documents or information is required.

1. **Not all matters accepted.** We cannot accept all legal matters for representation. TRLA/Legal Aid eligibility requirements, case type, Texas CBAR resources, availability of attorney volunteers, and the sufficiency of information you provided are all factors that can affect whether your matter may be placed for referral.
2. **Pro Bono Referral Authorization.** If we determine that your matter is eligible to refer, we will send you a *Pro Bono Referral Authorization* to complete and returnto us. This is your written permission for us to add a description of your organization and legal help requested to pro bono attorney email list.
3. **Acceptance by volunteer attorney/law firm.** If an attorney expresses interest in volunteering for your legal matter, the law firm must run a conflicts check before formally accepting your group for representation. Once conflicts have cleared, we will send written referral letters to both you and the attorney(s). Your letter will include the attorney’s contact information. You are responsible for making first contact with your attorney and for maintaining contact thereafter.
4. **Unresponsive or inactive.** Please be responsive to requests and communications from your attorney. If after more than one attempt your attorney is unresponsive, please let us know. Due to the number of applicants waiting for services, Texas CBAR cannot maintain inactive files. If your matter is not progressing or moving forward, Texas CBAR reserves the right, upon reasonable notice, to close the matter.
5. **User fees and costs.** All legal *services* are free of charge; however, your organization is responsible for *external costs,* such as filing fees charged by the IRS or other governmental agencies. These can run into several hundred dollars. Please ask your attorney about applicable filing or user fees.
6. **Role of Texas CBAR.** Texas CBAR is a referral-only program. Our role with your group ends at the point of referral to a pro bono attorney/law firm. At that point, you are a client of the law firm. Your organization is not a client of Texas CBAR or Texas RioGrande Legal Aid. We will contact your pro bono attorney periodically to determine whether the matter is or ongoing or if the legal work is finished. Although we are not responsible for the quality or level of services provided by your attorney, please let us know if you have issues with the representation so that we may evaluate the attorney and/or law firm for future referrals.

**Need help** with your application or the referral process? Email [texascbar@trla.org](mailto:texascbar@trla.org), or call us at 512.374.2712.

**Nonprofit Legal Resources:** Texas CBAR’sTRLA web page, <http://www.trla.org/nonprofits> contains FREE information, legal forms and guides on many legal issues that affect nonprofits.

**4920 N. IH-35, Austin TX 78751**

**Tel: 512.374.2712 Fax: 512.447.3940**

[**www.texascbar.org,**](http://www.texascbar.org,) **Email:** [**texascbar@trla.org**](mailto:texascbar@trla.org)