

NFPA Student Association Membership Application

This application is to be submitted for student association membership in the National Federation of Paralegal Associations, Inc. (NFPA®). In order to qualify, the applying student association must consist of students who are:

1. currently enrolled in a course of paralegal studies at an institutionally accredited* paralegal program, or
2. recognized, approved, and/or sponsored by an institutionally accredited* paralegal program, or
3. enrolled in a course of paralegal studies that is either approved by the American Bar Association or that is in substantial compliance with the ABA Guidelines for the Approval of Legal Assistant Programs, and
4. meet other such criteria as established by the NFPA® Board of Directors.

* Institutionally accredited is defined as "Agencies or associations who review post secondary education programs for purposes of confirming the quality of the program based upon their own pre-established standards."

Print this form and send it with a MasterCard, VISA, or American Express number/exp date or check made out to NFPA® and required attachments to:

NFPA®
23607 Highway 99, Suite 2-C
Edmonds, WA 98026

Name of Student Association

Mailing Address

City, State, ZIP

Telephone Number with Area Code

Name of Institution

Mailing Address

City, State, ZIP

Telephone Number with Area Code

Name of Institution Accrediting Paralegal Program

1. What is the name of the course of paralegal studies at this institution?

2. Is your paralegal program:

1. ABA-approved Yes____No____;
2. Not ABA-approved but in substantial compliance with the ABA guidelines.
Yes ____No ____ N/A____
3. Not ABA-approved but accredited and in compliance with NFPA's
resolutions on education Yes____No____ N/A____
Attach documentation to verify compliance.
4. If not an ABA-approved program, please check the accrediting body:

____ New England Association of Schools and Colleges
____ Middle States Association of Colleges and Schools
____ North Central Association of Colleges and Schools
____ Northwest Association of Schools and Colleges
____ Southern Association of Colleges and Schools
____ Western Association of Schools and Colleges Community
and Junior Colleges
____ Western Association of Schools and Colleges Senior
Colleges and Universities
____ Accrediting Council for Independent Colleges and Schools
____ Accrediting Commission for Career Schools and Colleges
of Technology
____ Council on Occupational Education
____ Other, state_____

5. Not ABA-approved but meets [NFPA® Membership - Suggested Curriculum](#) Yes ____ No____ N/A____ Attach documentation to verify compliance.

3. Program Director: (Please attach resume.)

Name

Title

4. Name and address of the individual student who will act as liaison to NFPA®?

Name

Mailing Address

City, State, ZIP

Telephone Number with Area Code

5. Date the student association was formed
6. Acknowledgment of Financial Responsibility: The applicant student association acknowledges financial responsibility for all dues and fees arising out of membership in NFPA® and agrees to guarantee payment for same.
-

Date

Signature

Name

Title

When submitting, enclose the following support documentation:

- The program brochure of institution catalog Articles of Incorporation (if applicable)
- Association Bylaws (if applicable)