

CPBO CLINIC IN A BOX® PROGRAMS 2019 SCHEDULING REQUEST FORM

Name of Legal Department or ACC Chap	pter:	
Primary Contact Name:		
Primary Contact Email Address:		
Type of Clinic:		
Select one CPBO support level:	Full Service	
	Limited Support (must have with Full Service)	prior experience
	Undecided	
Select one model: Legal Audit*	Select Topic	Undecided
* Legal Audit clinics must be co-hosted with organization).	h a legal services organization (no	ot a public interest

Indicate Dates of Interest (select more than one and indicate priority in the additional information column):

	Tuesday	Wednesday	Thursday	Friday	Additional Information**
January	8	9	10	11	
	15	16			
		23	24	25	
	29	30	31		
February				1	
	5	6	7	8	
	12	13	14	15	
April			4	5	
	9	10	11	12	
	16	17	18	19	
	23	24	25	26	
	30				

	Tuesday	Wednesday	Thursday	Friday	Additional Information**
May		1	2	3	
	7	8			
	14	15		17	
	21	22	23		
		29	30	31	
June	4	5	6	7	
		12	13	14	
	18	19		21	
	25	26	27	28	
July	9	10	11	12	
	16	17	18	19	
	23	24	25	26	
	30	31			
August			1	2	
	6	7	8	9	
	13	14	15	16	
	20	21	22	23	
September		4	5	6	
	10	11	12	13	
	17	18	19	20	
	24	25	26	27	
October	1	2	3	4	
	8				
				18	
			24	25	
November				1	
	5	6	7		
		13	14	15	
	19	20	21	22	

	Tuesday	Wednesday	Thursday	Friday	Additional Information**
December	3	4	5	6	
	10	11	12	13	
	17	18	19	20	

^{**} Please note that it takes approximately three months to plan a clinic. Clinics in January or February 2019 must be reserved three months ahead in Fall 2018 to allow for planning.

To reserve a date, the following is required:

- ❖ A signed CPBO form license agreement, which includes a restriction on distribution and transfer;
- ❖ Paid licensing fee; and
- ❖ Confirmed co-hosts (law firm and legal services or public interest organization).
- ❖ Dates will be reserved on a first-come, first-served basis

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^{**} Please let us know if there is a specific reason for the date you select, such as an all-hands department meeting.