



# SMOKY MOUNTAIN PARALEGAL ASSOCIATION

*an Affiliate of the National Association of Legal Assistants, Inc.*

Post Office Box 445

Knoxville, Tennessee 37901

[www.smparalegal.org](http://www.smparalegal.org)

## NEW MEMBER APPLICATION FOR STUDENT MEMBERSHIP

*Student Membership is available to any individual who is a full-time student in good standing in any college, junior college, or other school pursuing a course of study as a paralegal enrolled for a minimum of 12 semester hours or equivalent or who is taking all paralegal courses offered. Upon completion of the paralegal program, student members may maintain their student membership status for one year before transferring to active membership. Student members do not have voting privileges and cannot serve as officers of the association.*

Full Name: \_\_\_\_\_

Residence Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone No.: \_\_\_\_\_ Email Address: \_\_\_\_\_

**I prefer SMPA mailings by U.S. Mail** \_\_\_\_\_ **Electronically** \_\_\_\_\_

**Qualification:** Current Full Time Student \_\_\_\_\_ Graduated on: \_\_\_\_\_  
(Maintaining 1 year student membership)

### **SCHOOL ATTESTATION: To be completed by school director or instructor.**

I hereby attest that \_\_\_\_\_ is currently enrolled and in good standing in the paralegal program of \_\_\_\_\_  
\_\_\_\_\_ (school name).

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Director/Instructor

\_\_\_\_\_  
Title

**Completed Application Form with payment should be mailed to the address above. All members are bound by the NALA Code of Ethics and Professional Responsibility adopted by Smoky Mountain Paralegal Association.**

**Dues: \$ 25.00** The year for SMPA is January 1 through December 31. If joining after June 30, please pro rate your dues at \$2.00 per month for each month (including the month of application) until December 31 of the current year.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant