

Application for Annual Renewal of Provider, Program, Clinic
Supreme Court Rule 1404

Provider, Program, or Clinic Information

Provider, Program, or Clinic Name: _____

Contact Name and Title: _____

Street Address: _____

Mailing Address: _____

Phone Number: _____

Email: _____

The undersigned certifies that:

1. The above-mentioned provider, program, or clinic remains in compliance with Supreme Court Rule 1404.
2. Pursuant to Supreme Court Rule 1404, the following are attached:
 - a. a list of the names of all attorneys providing pro bono or low-cost direct legal services under Supreme Court Rule 1404 for this provider, program, or clinic;
 - b. a general summary of the types of pro bono or low-cost legal services provided under Supreme Court Rule 1404;
 - c. the total number of hours of pro bono or low-cost legal services provided by the provider, program, or clinic under Supreme Court Rule 1404;
 - d. for each attorney authorized to provide pro bono or low-cost direct legal services under Supreme Court Rule 1404 either:
 - i. an affidavit affirming that the information contained in the attorney's application for authorization remains accurate, or
 - ii. a new application for authorization.

The undersigned further certifies that the information contained in and attached to this application is true and correct.

Signature

Name (printed)

Title

Date