

## THE SURVIVORS' PROJECT



## PRO BONO COUNSEL REPRESENTATION AGREEMENT

By this agreement, and as Pro Bono Counsel through the Survivors' project,

| I, | (Pro Bono Counsel's Name) | , agree to undertake representation of |
|----|---------------------------|--|
| of | (Client's Name)           | , in the following matter:             |

As Pro Bono Counsel, I agree to:

- Undertake representation on a pro bono basis, which means that I will not charge the Client for attorney or paralegal hours expended on this matter or for consultation or office visit fees;
- Have my assigned mentor attorney review my application packet (including clemency application forms and supporting documents) prior to submitting to BPP;
- Complete all reporting requirements to Survivors' Project regarding the number of hours worked on my case each month and any case status reports, including all upcoming court dates and filing deadlines;
- Return a copy of the Client's entire case file to Survivors' Project's office upon case closure;
- Zealously represent the Client, including meeting with the client as many times as is necessary for adequate representation;
- Prepare and file all required applications, pleadings, motions, and objections in a timely manner;
- In a timely manner seek, present, and file evidence on Client's behalf including: supporting documentation, legal brief(s), declaration and/or testimony of expert(s) on country conditions and, where appropriate, on medical, dental and/or psychological issues relevant to the claim, corroboration of the claim through letters, official records and written declarations or testimony;
- Keep the Client and Survivors' Project well-informed about the status of his/her case;
- Keep all information provided by the Client confidential unless authorized by the Client to disclose it (except that information may be shared with other attorneys who are working on the case or assisting with representation);
- Consult with the Client before making any significant decisions about the case; Return all original documents that were furnished to me by the Client or by Survivors' Project; and
- Thoroughly review the attached referral letter and any additional resources or sample materials I received.

Furthermore, I acknowledge that:

- By agreeing to represent Client in the matter set forth above, I, as Pro Bono Counsel, do not agree to represent Client in any appeal. The parties may, in a separate written agreement, agree at a later time to extend representation to another matter; and
- Client and/or Survivors' Project may end this agreement at any time for any reason, and that Client and/or Survivors' Project will provide notification in writing if he/she wishes to end this agreement.
- I, as Pro Bono Counsel agree to notify the Survivors' Project when the attorney-client relationship ends with the client.

Finally, I certify that:

• I am a member in good standing of the state bar(s) of \_\_\_\_\_

(State and Bar Number)

• I am not subject to any order of any court or administrative agency disbarring, suspending, or otherwise restricting me in the practice of law.

(Signature of Pro Bono Counsel)

(Date)