HEARTLAND PARALEGAL ASSOCIATION EMPLOYER ATTESTATION FORM

(to be used if membership application completed online)

Member Name:	
Voting m	embership is open to individuals who meet one of the following requirements:
(1)	Successful completion of the Certified Legal Assistant (CLA/CP) exam through NALA, or
(2)	Graduation from an ABA approved program of study for paralegals, or
(3)	Graduation from a course of study for paralegals which is institutionally accredited but not ABA approved, and which requires not less than the equivalent of 60 semester hours of classroom study, or
(4)	Graduation from a course of study for paralegals other than those set forth above, plus not less than six months of in-house training as a paralegal, whose attorney-employer attests that such person is qualified as a paralegal, or
(5)	Receipt of a baccalaureate degree in any field, plus not less than six months in-house training as a paralegal whose attorney-employer attests that such person is qualified as a paralegal, or
(6)	A mininum of three years law-related experience under the supervision of an attorney, including at least six months of in-house training as a paralegal, whose attorney-employer attests that such person is qualified as
(7)	a paralegal, or A minimum of two years of in-house training as a paralegal, whose attorney-employer that such person is qualified as a paralegal.
	ATTORNEY/EMPLOYER ATTESTATION
This sect time.	ion must be completed by members applying under 4, 5, 6, or 7 for the first
	nereby attest that is employed by me and meets fications for voting membership in the Heartland Paralegal Association.
Attorney	/Employer Name:
Signature	e of Attorney/Employer:
Date:	
Please re	turn your completed form to: HPA

12641 Antioch Rd.

Suite 1038

Overland Park, KS 66282 or email to hpavp1@gmail.com