

MCBA  
MITCHELL H. COBERT  
MENTOR PROGRAM  
MORRIS COUNTY BAR ASSOCIATION

MENTOR APPLICATION

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

FIRM OR COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE (WORK): \_\_\_\_\_ (CELL): \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

1. Have you practiced law for five or more years? \_\_\_\_\_

2. State: \_\_\_\_\_ Year admitted: \_\_\_\_\_ State: \_\_\_\_\_ Year Admitted: \_\_\_\_\_

3. Are you a member of the Morris County Bar Association? \_\_\_\_\_

4. What is your area of legal expertise? \_\_\_\_\_

5. Do you currently have malpractice insurance? \_\_\_\_\_

6. In the past five (5) years have you even been publicly sanctioned or reprimanded by the New Jersey Supreme Court, the Disciplinary Review Board, or a disciplinary agency in another state?

\_\_\_\_\_  
Signature

Please attach a current resume or some brief biographical information, and a copy of your malpractice declaration page to the MCBA, when returning this application.

Return this form via e-mail to [assistant@morriscountybar.com](mailto:assistant@morriscountybar.com) and to Linda Mainenti Walsh, Esq. at [linda@mainentiwalshlaw.com](mailto:linda@mainentiwalshlaw.com).

Please include your name and the phrase "Mentor Application" in the subject line.