



DOMESTIC SELF-HELP RESOURCE CENTER VOLUNTEER AGREEMENT

As a volunteer, you are vital to providing access to justice for self-represented litigants (SRLs) through your work at the **Domestic Self-Help Resource Center**, hereinafter referred to as the Self-Help Desk. The Self-Help Desk operates at the 24th JDC and the Orleans CDC. To best serve the SRLs in an effective, efficient manner, we ask all volunteers sign and date a copy of this Volunteer Agreement before initiating services at the Self-Help Desk.

I, _____, registered myself as a volunteer with The Pro Bono Project. I agree to abide by the following policies:

1. I agree to not dispense legal advice or draft legal paperwork.
2. I will familiarize myself with available forms and the process that accompanies each situation.
3. I will sign up for a shift via The Pro Bono Project's email link one week beforehand and show up at least five minutes before 10 a.m. start time. To cancel, I will call 504-581-4043 to speak with a staff member.
4. I will ensure all SRLs sign the disclosure on the intake form acknowledging they understand that neither the Self-Help Desk, nor anyone associated with the desk, can provide legal advice nor represent them or any of their interests in any matter.
5. I am not permitted to represent an individual who visits the desk on the matter for which they are requesting information from our volunteers.
6. I will spend an appropriate amount of time with each SRL, not rushing nor allowing them to take significantly longer than the time allocated (around 20 minutes).
7. I will not solicit, nor will I refer SRLs from the Self-Help Desk to myself, or to another member of the private bar, for legal consultation or legal representation on any matter that would result in generating a profit. I understand the Self-Help Desk is a *pro bono* service provided by The Pro Bono Project and the court; referrals to the private bar may have the potential to create a conflict of interest, may violate the Model Rules of Professional Conduct and go beyond the scope of the duties of the Self-Help Desk.
8. If I believe I am unable to assist a visitor to the Self-Help Desk, I will refer them to another nonprofit service provider and provide them the Louisiana State Bar Association's Lawyer Referral Service number.
9. If I believe there is an issue with the forms or general operations at the Self-Help Desk, I will contact The Pro Bono Project directly and immediately. I will not attempt to directly deal with any conflicts on my own.
10. I understand if I have any issue with an SRL's behavior, I am allowed to refuse them service.

I have read and acknowledged this Volunteer Agreement and agree to be in compliance with the policies and procedures of the Self-help Desk.

Volunteer Signature: _____ Date: _____

The Pro Bono Project Representative Acceptance: _____ Date: _____