Nonprofit Organization
Request for Legal Assistance Form

Michigan Community Resources (MCR), home of Community Legal Resources, matches qualified nonprofits with volunteer attorneys. If your request is accepted and we find an attorney for you, all legal services are free of charge. Your organization is responsible only for out-of-pocket expenses such as copying costs and governmental filing fees.

This application will help us learn more about your organization and its legal needs. Please include any information that you think is useful, using additional sheets if necessary. It is important that you provide as much detail as possible. Be candid so that MCR’s staff can evaluate your application quickly and fairly.

Please note that MCR cannot serve every nonprofit that requests legal assistance. We consider a number of factors such as the community and population the organizations serves, whether the organization can afford an attorney on its own, the capacity of an organization to work with an attorney, and whether the legal issue involves litigation. **We cannot guarantee that we will be able to find an attorney to help**, but we will strive to find a volunteer if your organization qualifies.

*Submitting an application for legal assistance does not create an attorney-client relationship with MCR or its volunteers.*

To be eligible for pro bono legal referrals through MCR, your organization must meet one of the following. Please check all that apply:

- (1) 51% percent of the organization's membership is comprised of low-income persons (defined as persons whose income does not exceed 125% of the Federal Poverty Income Guidelines) or organizations that serve low-income individuals or communities;
- (2) The organization's statement of purpose includes activities to benefit low-income, disadvantaged and/or distressed communities; or
- (3) The matter on which legal assistance is sought raises issues of significant legal consequence to low-income, disadvantaged and/or distressed communities.
### ORGANIZATION INFORMATION

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### Contact Information

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<th>Name of Contact Person:</th>
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<td>Signature:</td>
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<td>Position/Relation to Organization:</td>
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### Organizational Background and Structure

Please describe the purpose and/or mission of the organization:

- [ ] Yes
- [ ] No

Has your organization ever applied for tax-exempt status with the Internal Revenue Service?

- [ ] Yes – What was the outcome? (Circle One)
  - [ ] tax-exempt (please attach copy of your IRS determination letter)
  - [ ] open
  - [ ] closed (FT file-terminated)
  - [ ] denied
  - [ ] revoked

- [ ] No

Does the organization have members?  

- [ ] Yes  
- [ ] No

If so, how many members?  

About how many individuals does the organization serve annually?  

_________
What geographic region and/or population does the organization serve?


Please attach a list of Board members and staff, or list these individuals and their positions below:


Program Activities

Please list the services and/or programs offered by the organization. If you have written brochures or other materials, please include them.


Please list your organization’s “service targets” for the current year, if available (e.g. “build 10 units of affordable housing,” “provide employment training for 100 youth”).


Would you describe your organization as “faith-based?” □Yes □No

If so, please describe how your program, or the legal issue at hand, relates to the broader community, i.e. what is your community base outside of the congregation?
FINANCIAL INFORMATION

What is the organization's annual budget? _________________. Please attach a 2-3 year budget for your organization and/or attach actual income statements from the past 2 years (with breakdown of revenue and expenses). If you have an annual report, please attach this document, as well.

Are you now a Michigan State Housing Development Authority (MSHDA) grantee?
☑ Yes ☐ No

If not, are you planning to apply to become one?
☑ Yes ☐ No

Does your budget contain a line for legal fees?
☑ Yes ☐ No

If yes, what is the amount? $___________________

What amount, if any, has your organization spent on legal fees in the past 2 years?

Year 1: $_____________
Year 2: $_____________

LEGAL NEEDS

Please specifically describe the legal needs for which your organization seeks assistance. If you need assistance with reviewing a contract, negotiating with other parties, resolving a dispute or any other matter that involves other organizations or individuals not affiliated with your organization, please identify those entities or individuals. Please also state whether you believe your organization’s request is urgent and when the request needs to be completed. If you have documents (e.g., correspondence, contracts, policies, litigation documents, title documents, etc.) please provide copies of them.

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If you have a need for ongoing legal advice, or anticipate future legal needs, please list the issues for which you may need assistance.

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Please list any individuals, organizations, or other entities that may be adverse to your organization with regard to this legal request.


Has a lawyer ever worked with your organization on the problems for which you now seek legal advice?

☐ Yes  ☐ No If so, please provide the lawyer’s name, firm name and telephone number, as well as a description of the work that was done.


Why is this lawyer no longer representing your organization in this matter?


Have you contacted your insurance company for legal representation on this matter?


Aside from this matter, please provide the names and affiliations of all lawyers who have represented your organization and describe the services s/he provided.


How did you hear of Michigan Community Resources/Community Legal Resources?


Before mailing this form, please be sure that you have included the following:

1. For established nonprofits requesting legal assistance
   - ☐ List of Board of Directors
   - ☐ Current annual budget (w/detailed expenses and revenues)
   - ☐ Annual report
   - ☐ Brochures or other promotional material
   - ☐ Articles of incorporation
   - ☐ By-laws
   - ☐ IRS determination letter
If legal request is related to a specific project, a narrative summary of the project (i.e., w/CDC’s requesting real estate assistance with a particular development) is also required.

Any other info required to better understand the nature of the legal matter (i.e., the contracts, agreements or other legal documents directly related to the legal matter, any court filings, regulatory correspondence, or correspondence between relevant parties)

Identification of potential adverse parties

2. For Clients Requesting Start-Up Legal Assistance:

If you require legal assistance with forming your nonprofit (i.e., help with drafting articles of incorporation and by-laws or help with applying for tax-exempt status), we will need the following information from you (we will not evaluate your application for placement unless these materials are provided to us):

- Evidence that the organization will be serving a low-income population/community (such as statistics of target area)
- Articles of incorporation and By-laws (if applicable)
- List of person serving or willing to serve as Board members and evidence that they’ve met at least once (such as board meeting minutes with signatures)
- A business plan or narrative that includes the organization’s mission, goals, timelines for achieving the goals, description of programs and services, market analysis, and plans to hire staff and/or recruit volunteers (Refer to sample business plan and required narrative description from Part IV of the 1023 application)
- 3 year budget and financial projections outline, including detailed expenses and revenues. (See required financials from Part IX of the 1023 application)
- Detailed fundraising plan identifying specific committed and potential sources of funding

Return Your Application:

By email:
Maureen Krasner
mkrasner@mi-community.org

By mail or fax:
Michigan Community Resources
Attention: Maureen Krasner
615 Griswold Suite 805, Detroit MI 48226
Direct Line: (313)969-1208
FAX: (313) 962-0797