

GEORGE MASON UNIVERSITY AMERICAN INN OF COURT NOMINATION OF NEW MEMBERS

2015-2016

The GMU Chapter of the American Inn of Court will accept nominations for new members between May 1, 2015 and May 15, 2015. Applications should include (1) an application form, (2) the resume or curriculum vitae of the prospective new member, and (3) a letter of recommendation (preferably from an existing member of the Inn). Please note that while only one letter of recommendation is required, multiple letters of recommendation are encouraged. Because of the limited space available, applicants may wish also to submit any other information that supports their anticipated contribution to the Organization. Applicants may nominate themselves for membership, or be nominated for membership by an existing member.

Membership is highly competitive. Membership in the Inn requires active participation. If a membership offer is extended, it is expected that an acceptance of membership in the Inn includes a commitment to attend at least four of the six regularly scheduled meetings (September through March) along with active participation on the pupilage team. Participation with the mentoring program is strongly encouraged.

All nominations should be e-mailed to Kathryn Grace, at the e-mail address of Kathryn.Grace@WilsonElser.com under the subject line "GMU Inn Membership." E-mail submissions are limited to 3MB.

George Mason University American Inn of Court Application Form

I.	Professional Information				
	Name:		Date:		
	Firm/Bu	usiness Name:			
		Address:			
		City:	State:	Zip:	
		Phone:	Fax:		
		Email:			
	Current	position/Job title:	Held since?		
	Previou	s positions/Job titles:	Dates Held:		
	Current	area(s) of practice:			
	Professional organizations to which you belong and any offices currently or previously he				
II.	Educati	onal Information:			
	College	/University where you obtained:			
	BA/BS:			Year:	
	JD:			Year:	
	Other:			Year:	
III.	Bar Adr	missions			

Year:

Admitted to:

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IV.	Personal Information (optional)						
	Home address:						
	City:	State:	Zip:				
	Phone:	Fax:					
	Email:						
	Personal interests/hobbles:						
٧.	General Information						
How did you hear about the Inn of Court?							
Why do you want to join the Inn of Court?							
What special skill or experience can you offer this Inn of Court?							
Applicant's Signature:		Sponsor's Signature:					
Applicant's Name:		Sponsor's	Name:				
FOR BOARD USE ONLY							
Applic	ation Information Verified?	Yes:	No:				
Member Conducting Verification:							
Comm	ents:						
Board/Membership Committee Action:		Accepted:	Declined:				
Membership level:		Associate:	Barrister:	Master:			
Comments:							