

Military Assistance Panel-Protecting the Protectors *Legal Assistance in Oregon*

The Oregon State Bar's Military Assistance Panel connects Oregon lawyers with Oregon's deployed servicemembers and their dependents in need of legal help.

Since 2003 the Oregon State Bar has been addressing legal concerns that Oregon service members may face immediately before, after, and during deployment. Federal and state legislation provide legal protections for a variety of legal issues to persons entering or called to active duty in the US armed forces. Although many military personnel and their families are aware of the Servicemembers' Civil Relief Act (SCRA), they may not have the legal expertise or financial resources available to take advantage of the Act's important provisions. Information on the Servicemembers' Civil Relief Act (SCRA) and state laws protecting service men and women [is available here](#).

The Oregon State Bar administers a referral panel that lists lawyers willing to help military personnel and their families. Our volunteer lawyers have been trained to provide legal assistance relating to the SCRA and a range of other legal issues. Due to the nature of military deployments, family law is generally the most common type of legal service sought by servicemembers from our volunteers. However, we also receive requests for volunteers to help with consumer and debtor/creditor law, real property (including foreclosure and landlord/tenant) law, and estate planning.

Lawyer volunteers should expect to offer one or two hours of pro bono advice and counseling to MAP clients. Additional pro bono representation is encouraged but not required.

How It Works

For Servicemembers:

1. Contact the Oregon Army National Guard at (971) 355-3455 for an authorization (military reference or "MR") number; and then,
2. Contact the Oregon State Bar's Lawyer Referral Service at (503) 684-3763 for a referral to a participating lawyer; and then,
3. Contact the participating lawyer and let them know you were referred through the Military Assistance Panel.

For Participating Attorneys:

1. Complete and return the attached registration form. Once we process your registration, you will receive an email confirmation.
2. When a servicemember is referred to you, we will send you a confirmation email with the servicemember's Military Referral ("MR") number.

Military Assistance Panel Program Registration

Oregon State Bar Referral & Information Services
PO Box 231935, Tigard, OR 97281-1935
Voice: (503) 431-6408 or (800) 452-8260 ext. 408
Fax: (503) 431-6444 or Email: ris@osbar.org

In addition to advising on the Servicemembers' Civil Relief Act, please check the referral categories under each panel for which you would like to receive referrals. Complete the signature and acknowledgment section, and return this form to the OSB.

Substantive Law Referral Categories

- | | |
|--|---|
| <input type="checkbox"/> 1902 Bankruptcy | <input type="checkbox"/> 1912 Taxation |
| <input type="checkbox"/> 1904 Consumer | <input type="checkbox"/> 1913 Estate Planning |
| <input type="checkbox"/> 1905 Criminal Law | <input type="checkbox"/> 1915 Immigration |
| <input type="checkbox"/> 1907 Family | <input type="checkbox"/> 1917 Landlord/Tenant |
| <input type="checkbox"/> 1910 Labor & Employment | <input type="checkbox"/> 1999 Other _____ |
| <input type="checkbox"/> 1911 Real Property | |

Servicemembers' Civil Relief Act training

A number of training options are available through the Oregon State Bar and the American Bar Association. Upon receipt of your completed registration form, we will e-mail a link to you that explains these training options.

Signature and Acknowledgment

I am an active member of the Oregon State Bar in good standing and am not the subject of a formal disciplinary proceeding. I have also completed (or will complete prior to accepting referrals) CLE training on the Servicemembers' Civil Relief Act. Please select one of the following:

- I maintain malpractice coverage with the Professional Liability Fund.
- I do not currently carry coverage with the Professional Liability Fund but will participate in the Military Assistance Panel Program through the special policy for OSB Certified Pro Bono Programs.

Signature _____ Date _____

(Print Name) _____ Bar # _____

Address _____

City/State/Zip _____ Phone _____

Fax _____ Email _____

I prefer to receive notices by e-mail fax

Return Form to:

FAX: 503.431.6444

**MAIL: OSB Military Assistance Panel
Attn: RIS
PO Box 231935
Tigard, OR 97281-1935**