## APPLICATION FOR COUNTY ISSUED IDENTIFICATION BADGE Certified Paralegal

NAME OF APPL	LICANT	Last	First	
			NE # ()	
COMPANY NAM	ИЕ		PHONE # (	)
BUSINESS ADD	DRESS			
EMAIL ADDRES	SS:			
LIST ANY OTHE	R NAME USE	D IN PAST 5 YEARS		
Certificate of S	ponsoring Atto	<u>orney</u>		
I certify the pers	on above is a p	aralegal, is employed in	my organization, and meets th	e criteria described below:
	The applicant visits the courthouse for paralegal business at least 26 times per year. The applicant would be unreasonably delayed if he/she were required to pass through a security screening station.			
my organization. Guilford County	If I fail to do s has the right to t/unreturned ID	<ul> <li>I understand the count</li> <li>verify use of ID badges</li> <li>badges. Should courth</li> </ul>	to county security when the per ity may not approve future ID b via camera or other electronic ouse visits fall below the require	adges for my organization. means. There will be a fee
Paralegal must	read and initia	al each item below:		
<ol> <li>I will not allow</li> <li>I will be acco</li> <li>I understand</li> <li>I understand</li> </ol>	wanyone withou ountable for my l that this is a pri that there is a \$	badge at all times and willege which can be reso \$15.00 fee lost/stolen/da	y me nor will I bring unauthorize ill immediately report it lost/stol cinded by proper authority at ar	en to 641-3068 ny time
Printed Name of	f Sponsoring At	torney	NC Sta	ate Bar #
Signature of Spo	onsoring Attorne	∍y		Date
Requirements	at Time of App	lication		
1) Complete	ed application.			
	NC certified par fiedparalegal.org		be a copy of the printout from t	he NC Bar website
3) \$15.00	fee (check mad	e out to Guilford County	Security or cash).	
Applicant Signat	ture		Date	
Badge #:		For off	fice use only  Expires:	_
Special Notes:				