



Orange County Bar Association

Mentoring Program

Is Now Accepting Participant Applications For The

2023 OCBA Mentoring Program

OCBA members are encouraged to participate in this year's program, which will be structured "group style" for the first time ever!

This new structure is designed to provide lawyers at all levels with a fun, group-mentoring experience, to assist in their career and practice development.

This program will assign participants into small, diverse groups where they can mentor and reverse-mentor one another. We feel excited to introduce this new experience and hope you will join this year!

To participate, please complete the attached Participant Application and Agreement and email it to mentoring@ocbar.org along with the required attachments.

Deadline to submit application is Friday, June 23, 2023.

**Orange County Bar Association
Mentoring Committee**

Post Office Box 6130

Newport Beach, CA 92658

Telephone: (949) 440-6700

Facsimile: (949) 440-6710

mentoring@ocbar.org



Participant Checklist

Before you submit your Participant Application, please complete this checklist to confirm that you have completed all **required** necessary steps to be considered for the OCBA Mentoring Program.

Complete and attach the following:

- ☐ I have read the Participant Guidelines.
- ☐ I have completed the Participant Application.
- ☐ I have completed the Participant Participation Agreement.
- ☐ Enclosed proof of errors and omissions insurance certificate, in an amount not less than \$100,000 for each occurrence and \$300,000 aggregate per year.

After completing the foregoing checklist, please email the requested attachments to mentoring@ocbar.org or mail to: OCBA Mentoring Committee, Post Office Box 6130, Newport Beach, CA 92658.

Failure to provide all required forms and other documentation may cause a delay in processing your application.

Participant Signature: _____ Date: _____



Orange County Bar Association

Mentoring Program Requirements, Rules & Restrictions

Requirements for Participants

- Licensed member of the State Bar of California;
- Orange County Bar Association Member;
- Approval of the Orange County Bar Association Mentoring Committee;
- No record of discipline with the State Bar of California (subject to the discretion of the OCBA Mentoring Committee);
- Commit to a one-year program;
- Must be available to meet with the other participants in the mentoring group for an initial mentoring session, and then at mutually agreeable times during the year, either in person or by video conference;
- Complete the OCBA Participant Application and OCBA Mentoring Program Participant Agreement;
- If in private practice, must be covered by errors and omissions insurance in an amount not less than \$100,000 for each occurrence and \$300,000 aggregate per year. Proof of insurance shall be provided to the OCBA with the signed "Participant Agreement".

Program Rules and Restrictions

- While we attempt to make sensible and satisfactory groups in the Program, there is no guarantee that Participants will be grouped with any particular types of co-participants, practice areas, interests, etc. We do not guarantee that we will accommodate any requests for particular types of Program groupings. If you are not satisfied with your group, you may bring it to the Program Coordinator's attention, but we do not guarantee that you will be reassigned to a different mentoring group or that any other measures will be taken. You are not obligated to participate in the mentoring group with which you are assigned, although we certainly hope that you will do so, and will find it a helpful and satisfying experience.
- Participants shall not use the Program as a method to locate employees, employment opportunities or unpaid internships within their mentoring group;
- Participants shall not request that anyone in their mentoring group join any matters as co-counsel nor shall Participants refer matters to other Participants during the course of the Program;
- Participants shall not seek or provide legal advice from anyone in their mentoring group on current and/or specific client matters & shall not ask other Participants to research or research for any other Participant substantive legal issues;
- Participation in the program is on a voluntary basis. Participants should use discretion in communicating with other members of the mentoring group by telephone and e-mail. Participants shall treat all communications with their mentoring group as confidential, but should recognize that such communications may not be privileged;
- Participants shall not engage in any inappropriate conduct. Any such conduct will result in immediate and permanent removal from the Mentoring Program;
- Participants shall not substitute information obtained from their mentoring groups for their own judgment or legal opinions, nor otherwise rely upon information from their mentoring groups in performing their duties and obligations to their own clients.
- The roster of Mentoring Committee members, meeting notes/minutes, and any details on the Committee's decision-making process is confidential and will not be disclosed.



ORANGE COUNTY BAR ASSOCIATION

Mentoring Program Participant Application

Please complete and submit the following Application by the above-stated deadline so that we may assign you into a mentoring group for the 2023 OCBA Mentoring Program. Please note the Requirements, Rules & Restrictions above prior to submitting your Application, along with your Participant Checklist and Checklist Items in this package.

Name: _____

Mailing address: _____

Telephone: _____

Email: _____

OCBA Member No. _____

State Bar No. _____

1. Please check the characteristics of a mentoring group that are most important to you:

- _____ size or type of practice
- _____ location of participants
- _____ type of work performed
- _____ areas of law
- _____ years in practice
- _____ educational background
- _____ other _____

It is more important that your mentoring group (*check one*):

- _____ live or work close to you
- _____ match your interest areas

2. Size or type of practice

I am a:

- _____ member of a large firm (50+ attorneys firm wide)
- _____ member of a medium firm (10-49 attorneys)
- _____ member of a small firm (2-9 attorneys)
- _____ solo practitioner (See also No. 9 below)
- _____ in-house counsel
- _____ government attorney
- _____ legal services attorney
- _____ other _____

3. Location of mentoring group

My work location is in:

- _____ Harbor (Balboa, CDM, Irvine, Newport, Costa Mesa)
- _____ Central (Tustin, El Modena, Orange, Santa Ana, Villa Park)
- _____ West (Cypress, Fountain Valley, Garden Grove, Los Alamitos, Seal/Huntington Beach, Westminster)
- _____ South (Aliso/Mission Viejo, Coto, Laguna, Lake Forest, San Clemente, San Juan Capistrano)
- _____ North (Anaheim, Brea, Buena Park, Fullerton, La Habra, Yorba Linda)

4. Areas of law

I am interested or practice in the following areas of law:

- _____ administrative/governmental
- _____ bankruptcy
- _____ business/commercial
- _____ construction
- _____ criminal law
- _____ elder law
- _____ employment/labor law
- _____ environmental law
- _____ family law
- _____ general practice
- _____ health law
- _____ immigration law
- _____ Indian law
- _____ insurance defense
- _____ intellectual property
- _____ international practice
- _____ juvenile law
- _____ landlord/tenant
- _____ personal injury/property damage
- _____ professional liability
- _____ real estate
- _____ securities
- _____ sports/entertainment law
- _____ taxation
- _____ wills/gifts/trusts/estates
- _____ other _____

5. Type of work performed

My work requires OR I would like to learn more about, the following type of work:

- ☐ trial practice
☐ litigation
☐ transactional
☐ appellate practice
☐ appearance before regulatory/administrative boards
☐ in house
☐ other _____

6. Outside Interests

I am involved (or am interested) in:

- ☐ bar-related activities
☐ civic activities

Please list additional interests, hobbies or activities you are involved in:

7. Preferred Meeting Times

I prefer meeting (*please check all that apply*):

- ☐ before work
☐ lunchtime
☐ after work
☐ No Preference

8. Preferred Means of Communication

I prefer communication by (*please check all that apply*):

- ☐ e-mail
☐ telephone
☐ in person
☐ virtual

9. What Is the Primary Objective You Would Like to Achieve In This Program?

10. Additional Information:

Law school: _____

Year of Admission: _____

Years of Active Practice (optional): _____

Courts Admitted/Special Admissions:

Other Professional Licenses? (CPA, MD, etc.)

Please include any additional information that would assist us in matching you with others in a mentoring group. Every effort will be made to make a successful mentoring group.

Please feel free to attach a current resume (optional).

I understand that the information provided in this application, and any additional information provided by me to the OCBA Mentoring Committee, is **not confidential** and may be shared with the members of the Mentoring Committee and other participants in my mentoring group.

Signature: _____

Date: _____

Please return to: mentoring@ocbar.org or
OCBA, Attn: Mentoring Committee
P.O. Box 6130
Newport Beach, CA 92658

Thank you for your participation.



ORANGE COUNTY BAR ASSOCIATION

Mentoring Program

Participant Agreement

I _____ (“Participant”) agree to participate in the Mentoring Program conducted by the Orange County Bar Association (the “OCBA”). The purpose of the Mentoring Program, as fully described in the Participant Guidelines that I acknowledge having received by signing below, is to provide an educational and professional development resource only.

I understand that, although my assigned mentoring group members are engaged in the practice of law, my mentoring group members will not render any legal or professional advice to me or to any of my clients. Any information provided to me by my mentoring group members is not intended to deal with any particular legal problem and I agree that it will not be relied upon by me as such.

I AGREE THAT I WILL NOT RELY ON THE INFORMATION I RECEIVE IN THE COURSE OF THE MENTORING GROUP RELATIONSHIP AS A SUBSTITUTE FOR MY OWN JUDGMENT OR LEGAL OPINIONS, AND THAT I WILL NOT OTHERWISE RELY UPON ANY INFORMATION OBTAINED FROM MY MENTORING GROUP IN PERFORMING MY DUTIES AND OBLIGATIONS TO MY OWN CLIENTS. I FURTHER UNDERSTAND THAT THE OPINIONS AND/OR STATEMENTS OF MY MENTORING GROUP ARE NOT A SUBSTITUTE FOR MY OWN OPINIONS OR INDEPENDENT RESEARCH AND THAT SUCH STATEMENTS ARE NOT MADE ON BEHALF OF THE OCBA.

In exchange for the opportunity to participate in the Mentoring Program, I agree on behalf of myself and my spouse, parents, children, family, partners, employees, agents, heirs, estate, executors, representatives, administrators, insurers, successors and assigns to fully release the OCBA, including its elected and appointed officers, board members, mentoring committee members, directors, employees, volunteers, participants, agents, attorneys and any other persons or entities acting on its behalf, and each of them, from any and all claims for injury, loss, liability, professional negligence, damages, lawsuits, expenses (including, but not limited to, attorneys’ fees) and any other injury or liability to me or any other person acting on my behalf, in connection with my participation in the Mentoring Program and I agree to waive any and all rights to make any of the above claims through a lawsuit or otherwise against the OCBA and the persons provided above.

I UNDERSTAND THIS RELEASE SHALL BE EFFECTIVE EVEN IF THE LOSS, DAMAGE OR INJURY WAS NOT FORESEEABLE OR RESULTS, IN WHOLE OR IN PART, FROM THE NEGLIGENCE OF THE OCBA OR ANY OF THE OTHER RELEASED PARTIES.

By signing below, I acknowledge and represent that I have read, and I agree to fully comply with, the Participant Guidelines. Further, I acknowledge and represent that **I HAVE READ THIS AGREEMENT CAREFULLY, I FULLY UNDERSTAND ITS CONTENTS AND I VOLUNTARILY AGREE TO ITS TERMS.** No oral representations, statements or inducements, apart from this written agreement, have been made. If any portion of this agreement is declared invalid by a court, the remainder shall continue in full force and effect.

Signature: _____

Date: _____