



**ORANGE
COUNTY BAR
ASSOCIATION**

OCBA 12 MONTH CORE MENTORING PROGRAM

NOW ACCEPTING PROTÉGÉ APPLICATIONS

OCBA attorney members in practice five years or less are encouraged to participate in the 2025-2026 Mentoring Program. This 12 month program will provide lawyers with a helpful, independent resource to assist in their career development.

Participant protégés will be matched with an experienced, active OCBA attorney member available in such areas as ethics and professionalism, practice and law office management, general lawyering skills and business/client development.

To participate, please complete the attached Protégé Application and email with requested attachment(s) to mentoring@ocbar.org

Deadline to submit application is Tuesday, July 1, 2025

**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



Protégé Checklist

Before you submit your Protégé 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 Protégé Guidelines.
- ☐ I have completed the Protégé Application.
- ☐ I have completed the Protégé 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.

Protégé Signature: _____ Date: _____





ORANGE COUNTY BAR ASSOCIATION

Mentoring Program

Protégé Guidelines

Requirements for Protégés

- Orange County Bar Association Member;
- Approval of the Orange County Bar Association Mentoring Committee;
- Commit to a one-year program;
- Must be available to meet with mentor for an initial mentoring session, and then at mutually agreeable times during the year, either in person or by video conference;
- Complete the OCBA Protégé Application;
- Complete the OCBA Mentoring Program Protégé Participation 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 “Protégé Participation Agreement”.

Restrictions on the Mentor-Protégé Relationship

- Protégés shall not use the Program as a method to locate employment with their mentor or his/her firm;
- Protégés shall not request that their mentor join any matters as co-counsel nor shall protégés refer matters to their mentor during the course of the Program;
- Protégés shall not seek or provide legal advice from their mentor on current and/or specific client matters and shall not ask their mentor to research or research for their mentor any substantive legal issues;
- Mentors serve on a voluntary basis. Protégés should use discretion in communicating with their mentor by telephone and e-mail;
- Protégés shall treat all communications with their mentor as confidential, but should recognize that such communications may not be privileged;
- Protégés shall not substitute information obtained from their mentor for their own judgment or legal opinions, nor otherwise rely upon information from their mentor in performing their duties and obligations to their own clients.



ORANGE COUNTY BAR ASSOCIATION

Mentoring Program Protégé Application

Please complete the questionnaire below so that we can know what's most important to you in a mentor and attempt to find the best possible match for you. Although it is often difficult to find someone who matches up precisely with every answer to every question, we will make every effort to find a compatible mentor. Indeed, we have found that some of the best mentor/protégé relationships have come from matches where the two people have some differences with their background and practice, for example. All of our mentors are seasoned attorneys who have an expressed interest in participating in our program and mentoring a less experienced lawyer – the most critical factor in any mentoring relationship.

Name: _____

Mailing address: _____

Telephone: _____

Email: _____

OCBA Member No. _____

State Bar No. _____

1. Please rank the characteristics of a potential mentor that are most important to you. (rank only those that are important to you, using No. 1 for the most important):

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

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

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

2. Size or type of practice

I would prefer a mentor who is 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 _____
- ____ no preference

3. Location of mentor

I would prefer a mentor who is located in the following district(s) (*please check all that apply*):

- ____ 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)
- ____ No preference

4. Areas of law

I would prefer a mentor who works in the following areas of law (**rank no more than three and only those that are important to you, using No. 1 for the most important**):

- ____ 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

I would prefer a mentor who engages in the following type of work (*rank only those that are important to you, using No. 1 for the most important*):

- ☐ 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
☐ other professional activities

Please list:

7. Preferred Meeting Times

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

- ☐ before work
☐ lunchtime
☐ after work
☐ no preference
☐ other _____

8. Preferred Means of Communication

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

- ☐ e-mail
☐ telephone
☐ no preference

9. What Is the Primary Objective You Would Like to Achieve With 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 a mentor. Although we may not be able to match you with a mentor meeting all of your preferences, every effort will be made to make an appropriate match.

Please feel free to attach a current resume.

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 my chosen mentor.

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
Protégé Participation Agreement

I _____ (“Protégé”) 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 Protégé Guidelines that I acknowledge having received by signing below, is to provide me with an educational and professional development resource only.

I understand that, although my assigned mentor is engaged in the practice of law, my mentor will not render any legal or professional advice to me or to any of my clients. Any information provided to me by my mentor 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 RELATIONSHIP AS A SUBSTITUTE FOR MY OWN JUDGMENT OR LEGAL OPINIONS, AND THAT I WILL NOT OTHERWISE RELY UPON ANY INFORMATION OBTAINED FROM MY MENTOR IN PERFORMING MY DUTIES AND OBLIGATIONS TO MY OWN CLIENTS. I FURTHER UNDERSTAND THAT THE OPINIONS AND/OR STATEMENTS OF MY MENTOR 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, mentors, protégés, 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 Protégé 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: _____