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ILLINOIS PARALEGAL ASSOCIATION
ATTORNEY DECLARATION FOR
ILLINOIS ACCREDITED PARALEGAL CREDENTIAL (ILAP)

I, _____, Esquire, declare as follows:

1. I am an attorney admitted to the State Bar of _____,
2. I am personally acquainted with _____,
3. The majority of the applicant's duties that are performed while employed/retained in my firm/company during the period _____ to _____ consisted of substantive legal work, defined by IPA as those tasks requiring substantive legal knowledge or legal work requiring recognition, evaluation, organization, analysis and/or communication of relevant facts and legal concepts, and that would otherwise by law, rule or ethics be performed exclusively by an attorney.
4. The above statements are true and correct to the best of my knowledge, information and belief.

Date

Signature

Address: _____

Telephone No.: _____

Email Address: _____

[Additional copies of the Attorney Declaration to cover the work experience requirements may be submitted as needed. The number of years of work experience attested to in the Attorney Declaration(s) should correspond to the subsection of the Education and Experience Criteria under which you are applying.]