

**HEARTLAND PARALEGAL ASSOCIATION STUDENT MEMBERSHIP**

Member Name: \_\_\_\_\_

Application submitted online: \_\_\_\_\_

**SCHOOL ATTESTATION - Required of all student applicants/renewals**

I hereby attest that \_\_\_\_\_ is currently enrolled in the  
paralegal program at \_\_\_\_\_.

Program Director or Instructor: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_