

**Roger Williams University School of Law
Business Start-up Clinic**

REQUEST FOR LEGAL ASSISTANCE FORM

General Information:

- We provide legal assistance to nonprofit organizations and small businesses that are unable to afford market rate for legal services. For more information on the types of services we provide, please visit our website at <http://law.rwu.edu/academics/institutes-programs/clinical-programs/business-start-clinic/prospective-clients>
- We work with organizations that fit our other selection criteria and are a good match for our student program, depending upon our capacity in a given semester. We generally work with Rhode Island businesses and nonprofit organizations.
- Unfortunately, we cannot meet all of the requests for our services. We cannot promise that we will be able to take you on as a client or provide all of the help that you need. *(Please note that even if we proceed to discuss the potential for a client relationship with you, neither you nor your business or organization will be a client of the organization unless and until that relationship is confirmed in writing and signed by us and by you.)* We also cannot promise that we will be able to review and respond to this application in time for any deadlines that you may describe below.
- This form helps us learn more about your organization/business so that we can determine whether your organization and our Clinic are a good match.
- You can return the completed form to us by PDF or simply answer the form questions in the body of an email.

Please note that our students work on projects in the Business Start-up Clinic during their fall semesters (from approximately September through November) and their spring semesters (from approximately February through April). We typically review applications for potential fall semester projects in June and July and contact applicants in July and August. We typically review applications for potential spring semester projects in November and December and contact applicants in January.

Thank you for your interest in the Business Start-up Clinic, and we look forward to hearing from you!

Organization/Business Name (if you have one)	
Contact Person	
Address	
Website	
Phone	
E-mail	
Referred by	
Date	

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- 1. Organization's/Business' current legal needs (please describe as best you can):**

- 2. Are there any time deadlines we should know about? What are they and why is that the deadline?**

- 3. Have you, or has the business/organization, talked to/worked with another lawyer already? Who? What happened? Why is that lawyer no longer working with you?**

- 4. Please describe the business/organization, including: What is the business? What is/will be the mission of the organization? What are the current/planned activities of the organization?**

- 5. Where is the business located?**

- 6. Where do its owners live? Where does its business and management happen?**

- 7. Who is the client base/what community does or will it serve?**

- 8. What are the current/anticipated annual revenues?**

- 9. Who are the owners of the business? Who are the directors of the organization? What is their experience in the business/organization? Please give a brief biography of each owner/director.**

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10. How long has the business/organization existed? Please note if no entity has been formed yet and/or if business has not yet started.

11. Is the business/organization a separate legal entity? Y N

a. If so, what is the form of the business?

- i. Non-profit Corporation**
- ii. For-Profit Corporation**
- iii. Limited Liability Company**
- iv. Other**

b. If so, in what state was the entity formed?

12. If it is just starting, what steps have been taken to create the business/organization?

13. Does the business/organization have employees? How many?