State of Minnesota   **District Court**

County of:	Judicial District:
	Court File Number:
	Case Type:

Plaintiff/Petitioner (first, middle, last)

vs

Defendant/Respondent (first, middle, last)

Date Case Filed: _____

**Legal Paraprofessional Pilot Project
Certificate of Representation and Parties
and Authorization to Appear in Court**
(Minn. Gen. R. Prac. 104(a))
(Minn. Supervised Practice Rules, Rule 12)
This form is available until the Pilot Project ends March 2023

This Certificate must be filed pursuant to Rule 12.01 of the Minnesota Supervised Practice Rules when a legal paraprofessional is authorized to appear on behalf of a client. Rule 104(a) of the General Rules of Practice for the District Courts also requires this Certificate be filed if the case is a family case or a civil case listed in Minn. Gen. R. Prac. 111.01. **If information is not known to the filing party at the time of filing, it shall be provided to the Court Administrator in writing by the filing party within seven (7) days of learning the information**. Any party impleading additional parties shall provide the same information to the Court Administrator. The Court Administrator shall, upon receipt of the completed certificate, notify all parties and their attorneys or paraprofessionals, if represented by counsel or paraprofessional, of the date of filing the action and the file number assigned.

Attorney for Plaintiff/Petitioner
☐ Supervising Attorney for Paraprofessional

_____
Name

_____
Postal Address

_____
City   State   Zip Code

(_____) _____
Telephone Number

_____
E-mail address

_____
Minnesota Attorney License No.

Attorney for Defendant/Respondent
☐ Supervising Attorney for Paraprofessional

_____
Name

_____
Postal Address

_____
City   State   Zip Code

(_____) _____
Telephone Number

_____
E-mail address

_____
Minnesota Attorney License No.

Complete the following section for the legal paraprofessional who is participating in the Legal Paraprofessional Pilot Program (LPPP) and is going to represent the client or appear in court on behalf of the client. Refer to the roster [*add link*] to confirm pilot participation approval.

Paraprofessional for Plaintiff/Petitioner

_____
Name

_____
Postal Address

_____
City   State   Zip Code

(_____)_____
Telephone Number

_____
E-mail address

Paraprofessional for Defendant/Respondent

_____
Name

_____
Postal Address

_____
City   State   Zip Code

(_____)_____
Telephone Number

_____
E-mail address

Note: If either Plaintiff/Petitioner or Defendant/Respondent is later represented by a legal paraprofessional through the Legal Paraprofessional Pilot Project, the legal paraprofessional's and supervising attorney's name, address, telephone number, and attorney ID number must be immediately provided, in writing to the Court Administrator within 7 days of learning the information.

Plaintiff/Petitioner, Self-represented

_____
Name

_____
Postal Address

_____
City   State   Zip Code

(_____)_____
Telephone Number

_____
E-mail address

Defendant/Respondent, Self-represented

_____
Name

_____
Postal Address

_____
City   State   Zip Code

(_____)_____
Telephone Number

_____
E-mail address

(Attach additional sheets for additional attorneys, paraprofessionals, and/or parties)

Authorization to Appear in Court

Rule 12.01 of the Minnesota Supervised Practice Rules require the legal paraprofessional's supervising attorney to complete this statement which authorizes the legal paraprofessional to appear in court on behalf of the client.

I, _____ (supervising attorney), authorize

_____ (paraprofessional) to appear in court on behalf of

_____ (client/party).

Legal paraprofessionals are authorized to represent clients in proceedings for the following civil case areas:

Housing disputes as defined in:
- Minn. Stat. Chapter 504B
- Minn. Stat. § 484.014

Family law cases with services limited to advice and hearings related to:
- Child Support Modification
- Parenting-Time Disputes
- Paternity Matters
- Default Hearings
- Pretrial Hearings
- Informal Family Court Proceedings

Please specify the proceedings for which the legal paraprofessional is authorized to provide

service in this case: _____

_____

_____

This authorization is valid _____ [start date] through _____ [end date].

_____
Signature of Supervising Attorney   Date Signed

_____
Print Name of Supervising Attorney