UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ILLINOIS

Plaintiff(s))			
)	Case No:		
	V.)			
)			
)	Judge:		
Defendant(s))			
)			
MOTION FOR ATTODNEY DEDDESENTATION					

MOTION FOR ATTORNEY REPRESENTATION (NOTE: Failure to complete all items may result in the denial of this motion.)

- I, ______, declare that I am the (check appropriate box)
 □ plaintiff □ defendant in this case and that I am unable to afford the services of an attorney. I hereby ask the Court for an attorney to represent me in this case.
- 2. I declare that I have contacted the following attorneys/organizations seeking representation: (NOTE: This item must be completed.)

but I have been unable to find an attorney because:

3. I declare that (check all that apply):

(Now:)

□ I *am not* currently represented by an attorney requested by the Court in any federal criminal or civil case.

OR

□ I *am* currently represented by an attorney requested by the Court in a federal criminal or civil case. The case is described on the back of this page.

(Earlier:)

□ I *have not* previously been represented by an attorney requested by the Court in any federal criminal or civil case.

OR

- □ I *have* previously been represented by an attorney requested by the Court in a federal criminal or civil case. The case is described on the back of this page.
- 4. I declare that (check one):
 - □ I have attached an original Application for Leave to Proceed *In Forma Pauperis* detailing my financial status.

[If you need additional space for ANY section, please attach an additional sheet and refere I have previously filed an Application for Leave to Proceed <i>In Forma</i> , it is still true and correct.						
		☐ I have previously filed an Application for Leave to Proceed <i>In Forma Pauperis</i> in this ca However, my financial status has changed and I have attached an Amended Application to Proceed <i>In Forma Pauperis</i> to reflect my current financial status.				
5. \Box I declare that my highest level of education is (check one):				one):		
		Grammar school	\Box Some high school	☐ High school graduate		
		□ Some college	□ College graduate	D Post-graduate		
6.		I declare that my ability to speak, write, and/or read English is limited because English is not my primary language. (Check only if applicable.)				
7.		I declare that this form and/or other documents in this case were prepared with the help of an attorney from the U.S. District Court <i>Pro Se</i> Assistance Program. (Check only if applicable.)				
8.	I declare under penalty of perjury that the foregoing is true and correct.					
Movant's Signature			Stre	Street Address		
	Date	2	City	City, State, Zip		
Ot	her ca	ses in which an attorney r	requested by this Court has rep	presented me:		
C	ase N	ame:		Case No.:		
A	ttorne	ey's Name:	The case i	is still pending: Yes No		
Т	he app	pointment was limited to	settlement assistance: Yes	No		
C	ase N	ame:		Case No.:		
А	ttorne	ey's Name:	The case i	is still pending: Yes No		
Т	he app	pointment was limited to	settlement assistance: Yes	No		
C	ase N	ame:		Case No.:		
Attorney's Name:			The case i	is still pending: Yes No		

The appointment was limited to settlement assistance: Yes ____ No ____

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]