

**SOUTH CAROLINA LAWYERING MENTORING PROGRAM
DESIGNATION OF MENTOR/REQUEST FOR APPOINTMENT OF MENTOR**

Mentoring Period: November 2006 to December 2007

Full Name of Newly Admitted

Lawyer to be Mentored: _____

South Carolina Bar Number: _____

Check the appropriate response:

_____ I have selected a mentor, who has agreed to serve in that capacity during the mentoring period. The name and address of my proposed mentor is

Name: _____

Mailing Address: _____

_____ I have not obtained a mentor and ask that one be appointed for me.

Signature: _____

Please print or type your name and address: _____

Submit Completed Form by December 15, 2006 to:

**South Carolina Bar
Attn: Kali Campbell Turner, Esquire
Post Office Box 608
Columbia, SC 29202-0608**