Timeline of Partial to Full Accredited Representative Initiative 2020

June 26:
- Submit completed MOU signed by partial accredited rep, Project Coordinator, and Authorized Representative of participating organization;
- Pay $250 registration fee

Don’t wait to set-up in-house/local mentorship arrangement with attorney or fully accredited rep! Start to obtain hands-on experience through shadowing ASAP.

Begin to schedule court observation of master calendar hearings (and individual hearings through mentorship, if possible)

July 8: Attend kick-off webinar at 2pm ET

July through August: E-learning course comprised of the following:
- 5 Webinars addressing the following topics:
  - Case Assessment (exercise)
  - Anatomy of a Removal Hearing including Burdens of Proof, Contesting Charges
  - Non-LPR Cancellation of Removal
  - EOIR Practice Rules, Ethics
  - Program Considerations for Providing Removal Defense
  - (Optional) Federal Rules of Evidence for Immigration Court Reps
  - (Optional) BIA Appeals Basics
- Reading Materials
- Exercises and Discussion Forum
- Posting of court observations

August through November/early 2021: Continue to review sample case file in preparation for in-person court skills training

Attend and participate in 3 day in-person OR online court skills training scheduled between November 2020 and early 2021.

Due to COVID19, CLINIC is planning to create an online equivalent version of the Court Skills training, if the in-person portion is unable to move forward.

Consult with CLINIC FSC on preparing application for full accreditation using R&A toolkit step-by-step guide and samples. Provide final draft for review, submit, and provide date(s) of filing and/or OLAP determination by March 31, 2021.
Plan to take first court case within 3 months of receiving full accreditation OLAP determination (likely Spring 2021)

Final Report to CLINIC: type of first court case and provide story from fully accredited representative in order to fulfill all MOU requirements (use provided report form).

_________________________________   ___________________
Name of Partial Accredited Representative    Email and Phone

Signature of Partial Accredited Representative    Date

Name of Project Coordinator

Signature of Project Coordinator    Date

Name of Mentor

Signature of Mentor    Date