

**NOTICE OF ADDITIONAL OR CHANGE OF EMPLOYING
AGENCY/SUPERVISING ATTORNEY
ILLINOIS SUPREME COURT RULE 711**

To: Rule711@illinoiscourts.gov, or
Administrative Office of the Illinois Courts
222 N. LaSalle, 13th Floor
Chicago, IL 60601

The services authorized by [Illinois Supreme Court Rule 711](#), which I acknowledge I have read, will be performed by me for:

Full Name of Agency

Agency Address

City/State/Zip Code

Agency Telephone Number & Email Address

Supervising Attorney's Name & ARDC #
(Must be a member in good standing of the Illinois Bar)

The Agency indicated above is (check appropriate box):

- ☐ A legal aid bureau, legal assistance program, organization or clinic chartered by the State of Illinois or approved by a law school approved by the American Bar Association.
- ☐ The Office of the Public Defender;
- ☐ An office, agency, or department of the State or any of its subdivisions; or
- ☐ An office, agency, or department of the United States or any of its subdivisions

Supervising Attorney's Signature

Dated this _____ day of _____, 20____

Law School Student's Signature

Name: _____
Address: _____

Telephone: _____
711 License #: _____

For office use only:

Approved by: _____
Date: _____