



As used herein, Company refers to a member insurance company of Axis Insurance

# Part Time Attorney Questionnaire



1. How many hours per week do you for your firm in the private practice of law? \_\_\_\_\_
2. Are you engaged in any business activity or employment outside of your part time law practice? . . . . .  Yes  No
  - a. If "Yes", Provide details regarding what your job responsibilities are for this outside activity or employment.
  
  - b. Indicate how many hours per week you devote to it. \_\_\_\_\_
3. Provide details regarding why you are only practicing law for your firm on a part time basis.
  
4. Do you intend to expand your practice to more than 26 hours per week in the future? . . . . .  Yes  No

APPLICANT UNDERSTANDS THE INFORMATION SUBMITTED HEREIN BECOMES A PART OF THE APPLICANT'S LAWYERS PROFESSIONAL LIABILITY INSURANCE APPLICATION AND IS SUBJECT TO THE SAME REPRESENTATIONS AND CONDITIONS.

**Sign and date in ink**

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Name of firm: \_\_\_\_\_