 **The Florida Bar Family Law Section**

**Alberto Romero Making a Difference Award**

**2022 Nomination Form**

Begun in 2010 by Former Section Chair, Magistrate Diane Kirigin, The Family Law Section’s **Alberto Romero Making a Difference Award** seeks to publicly acknowledge the efforts of The Florida Bar, Family Law Section members who “make a difference” in the lives of the underserved or disadvantaged in our State. In acknowledging the good work of its members – attorneys, judicial officers and affiliate members - it is the Section’s goal to educate the public about individuals who provide outstanding *pro bono* services or engage in other types of outstanding volunteer community activities and pursuits that improve the lives of Florida’s children and families ***and*** encourage other Section members to undertake *pro bono* or other volunteer services and activities.

Each year, the Section selects a member and/or affiliate member to honor for their service and commitment to their communities. The chosen members will be featured in the Section’s email newsletter, FAMSEG, accompanied by a press release, and will also receive a recognition plaque memorializing their service and activities. Alberto Romero Making a Difference Awards are presented at the Family Law Section’s annual awards and installation luncheon in June during The Florida Bar’s Annual Convention. Nominations for this year’s Award are due by April 30, 2020.

**ELIGIBILITY:**

• If the nominee is an attorney or judicial officer, he or she must be a member of The

Florida Bar in good standing. If they are an affiliate member (professional or para-professional) they must be a member in good standing of their oversight organization, if any.

• Must be a member of The Florida Bar Family Law Section.

• May be an employee or member of an organization providing free or low-cost legal services

to the disadvantaged or underserved; however, the pro bono services or volunteer activities

for which the person is nominated cannot arise from a work-related service or activity for

which the nominee is paid (i.e. as part of his or her normal, everyday responsibilities).

* The nominee’s overall or cumulative *pro bono* and/or volunteer service and activities record may be considered. Consideration of the service and activities of the nominee is not limited to the current Bar year, but must include some service and activities during this period.

• The *pro bono* and/or volunteer service and activities must be verifiable by the Section.

The information requested on this nomination form should be as complete as possible so that the Committee has, or may obtain if necessary, the information needed to give fair and proper consideration to the nominee. Client names are not necessary. Client names will not be used for any news releases or other public disclosures without client’s written consent. However, the information on the form or appended attachments must be verifiable by the Committee. It will provide the basis on which the selection is made.

**PLEASE ATTACH AS MANY ADDITIONAL PAGES AS NECESSARY.**

1. **Please check one of the boxes below as appropriate for the NOMINEE.**

[ ] Nominee is a member of The Florida Bar, Family Law Section.

[ ] Nominee is an affiliate member of The Florida Bar, Family Law Section.

2. **Please identify the nominee by name, mailing address, telephone number, and email address.** (If the NOMINEE is not an attorney or judicial officer, please identify the professional or paraprofessional status of the affiliate member. For example: mediator, C.P.A., mental health provider, paralegal, investigator, or other service provider, etc.).

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If affiliate member, professional or paraprofessional status:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. **In a separate attachment, describe the ways that the nominee has voluntarily contributed a significant portion of time to provide *pro bono* and/or volunteer services or participated in community activities to the underserved or disadvantaged in the State of Florida.**

**TO BE CONSIDERED, NOMINATIONS MUST INCLUDE THE FOLLOWING:**

a. A list and description of the cases, matters, activities or services furnished by the

nominee which are pertinent to this award. Orders or judgments reflecting disposition of *pro bono* or volunteer activities and services, newspaper articles, certificates of recognition for activities or services, and all other manner of supporting documentation may be attached as well.

b. An estimate of the number of hours the nominee contributed to the pro bono or

community activities or services to the underserved or disadvantaged in the State of

Florida.

4. **Does the nominee participate in a formal *pro bono* program through a legal services organization, local bar association *pro bono* project, legal services private bar involvement project, etc.?**

Please check one box. [ ] YES [ ] NO [ ] UNKNOWN

If YES, identify the *pro bono* program by name and address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

5. **If the nomination is based upon the nominee’s *pro bono* services, has that *pro bono* service contribution been made primarily by way of participation in a formal *pro bono* program?**

Please check 1 box. [ ] YES [ ] NO [ ] UNKNOWN

If NO, explain how the *pro bono* contribution has been made: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. **If the nominee is an *affiliate member* and he or she provided *pro bono* services has that *pro bono* service contribution been made primarily by way of participation in a formal *pro bono* program?**

Please check 1 box. [ ] YES [ ] NO [ ] UNKNOWN

If NO, explain how the *pro bono* contribution has been made: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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7. **If the nomination is based upon the nominee’s volunteer activities or services, please describe in detail in a separate attachment those activities and services and the resulting benefits.**

8. **How many years has the nominee been practicing in his or her profession.** \_\_\_\_\_ years.

9. **If available to you, please attach a current resume or C.V. of the nominee.** If the resume does not include it, please identify all local, state and national professional associations and organizations, as well as social service, humanitarian, charitable associations and organizations, of which the nominee is a member. As to each, identify the committees, leadership positions and activities in which the nominee participates and list all significant contributions.

10. **Please describe all other awards or honors that the nominee has received related to his or her professional and personal endeavors that may be relevant to consideration of the nominee for this award.**

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11. **Please identify by name, mailing address, telephone number and email address the person(s), organizations or associations making this nomination and their relationship to the nominee, if any.**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If an organization or association, provide the name of the primary contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the address, telephone number or email address for the contact person is different from the above, then please complete the following:

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Submitted by:** \_\_\_\_\_\_\_\_\_\_ \_

Print Name: \_\_\_\_\_\_\_\_\_\_ \_

If you have any questions, please contact attorney **ROBIN J. SCHER** at: **(561)626-5640** or [rjs@flafamilylawfirm.com](mailto:rjs@flafamilylawfirm.com).

**Nominations are due by May 20, 2022. Please retain a copy for your records and SUBMIT the original completed nomination form and all attachments by email to: rjs@flafamilylawfirm.com** **and be certain to include “Nomination for Making A Difference Recognition” in the subject line or by US Mail to:**

**Robin J. Scher, Esquire**

**11911 US Hwy 1, Ste 201-32**

**North Palm Beach FL 33408**