



Law Institute of Victoria Legal Assistance Scheme

APPLICATION FORM

1. Contact details

Name _____

Address _____

Town/suburb _____

Postcode _____

Postal Address (if different from above) _____

Contact Numbers and Email (please provide at least one)

Work _____

Home _____

Mobile _____

Email address _____

2. How did you hear about the Law Institute of Victoria Legal Assistance Scheme?

(please mark one box)

Already Knew

Community Legal Centre

Court/tribunal

Friend/relative

Law Institute of Victoria

Legal Aid

PILCH website/newsletter

Private Law Firm

The Victorian Bar

Other (please specify) _____

3. Has a solicitor acted for you in this matter?

Yes

No

If yes, please provide details about your solicitor:

Solicitor's name _____

Phone _____

Firm/Organisation _____

Address _____

Town/Suburb _____

Postcode _____

Did the solicitor assist you:

For free

For reduced fee

For full fee

Why is the solicitor no longer assisting you?

4. Have you had contact with other legal service providers in relation to this matter?

Yes No

If yes, who did you contact and what assistance did you receive?

5. Legal Aid Application

(a) Have you applied for legal aid in relation to this matter?

Yes No

If no, why not?

(b) Was legal aid granted or refused?

Granted Refused

(c) If legal aid was refused, what were the grounds for refusal?

Merit Financial Guidelines

Other (please specify) _____

(d) Have you appealed the decision?

Yes No

(e) If your appeal was unsuccessful, have you sought an independent review of the decision?

Yes No

Please attach a copy of the refusal letter (if any) from Legal Aid

6. About your legal matter

(a) Briefly describe your legal issue, and what you hope to achieve with the help of a solicitor (If you require more space, please attach an extra page).

(b) List any relevant documents, letters, files, agreements, contracts, or reports which you think are relevant. Please send **photocopies** of these documents to us with your application (attach extra pages as needed)

	Date	Who wrote it	Type of Document	Do you have it?
1.				
2.				
3.				
4.				
5.				

(c) Are there any current legal proceedings?

Yes No

If yes, when is the next court or tribunal date?

Which court or tribunal?

What is the location of the court or tribunal?

What is the type of hearing?

(For example, mention, directions, conference, mediation, contested hearing, trial, appeal)

(d) Please list the other parties involved and, if they are represented, provide the names and contact details of their solicitors.

7. Your Financial Circumstances

(a) Are you currently employed?

Yes No

If no, when did you last work in paid employment? _____

If yes, are you working:

Full time Part Time Casual Other

What is your role? _____

What is the name of your employer/business? _____

(b) Are you receiving any government benefits?

Yes No

If yes, please select the benefit you are receiving:

Aged Pension Austudy/Abstudy Newstart Allowance
 Parenting Payment Single Parenting Payment Partnered Sickness Benefit
 Youth Allowance Other (please specify) _____

(c) Please provide details of YOUR income

Total taxable income last financial year \$ _____

Source of that income (eg paid work, government benefit, etc) _____

Current weekly income (after tax) \$ _____

(d) Do you have any dependants?

Yes No

If yes, please provide details: _____

(e) Do you receive financial support from any other person?

Yes No

If yes, who do you receive financial support from? (For example, spouse, partner, child, other relatives)

Please provide details of the SUPPORTING PERSON'S income:

Total taxable income last financial year \$ _____

Source of that income (eg paid work, government benefit, etc) _____

Current weekly income (after tax) \$ _____

(f) Assets and debts

Do you own any assets, either by yourself or jointly, or have any interest in any assets? (For example: a home, other real estate, motor vehicle, cash in bank accounts or trusts, shares or other assets of significant value).

Yes No

If yes, please provide details of these assets:

Asset	\$ Value	\$ Owing	Owned by
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	

(g) Do you have any debts?

Yes No

If yes, please provide details of these debts:

(For example, mortgage, credit card debts, bank loan, car loan)

Debt	\$ Owing	Owed to
	\$	
	\$	
	\$	
	\$	

Please note that we may require further information about your financial circumstances or your supporting person's finances to properly assess whether pro bono assistance is appropriate in your matter.

8. Applicant's declaration and authority to release information

I (name)

of (home address)

authorise the Law Institute of Victoria Legal Assistance Scheme (**LIVLAS**) to discuss my case with, and disclose any information provided by me to LIVLAS, to any solicitor or barrister:

- i. who is acting for me;
- ii. who has previously acted for me; or
- iii. to whom LIVLAS are considering referring my case.

undertake to:

- i. notify LIVLAS of any change in my financial circumstances;
- ii. notify LIVLAS of any change in my address;
- iii. notify LIVLAS of any new matter which might affect my case; and
- iv. provide all additional information requested by LIVLAS.

understand and accept:

- i. the conditions of receiving assistance from LIVLAS as outlined in the **Application Information** and
- ii. that LIVLAS reserves the right to suspend or cease the provision of legal assistance if they become aware that the information provided by me is false or misleading

I declare that all information provided by me to LIVLAS is true and correct.

Signature

Date

Return this form and any relevant documents LIVLAS at PO Box 16013 Collins Street West, Melbourne VIC 8007

If you need any help completing this form, please ring LIVLAS on (03) 8636 4425.

If there is insufficient space, you may attach additional information to this application.



Authority to Obtain and Disclose Information

I (name)

of (home address)

authorise the Law Institute of Victoria Legal Assistance Scheme:

- a) to request and receive personal and financial information and documentation in relation to me, and
- b) in the discretion of the Law Institute Legal Assistance Scheme and its authorised officers to disclose relevant personal and financial information and documentation about me to third parties for the purposes of assisting me.

Signed: _____

Dated: _____