

# Application for Pro Bono Referral for Individuals



## HOW TO APPLY

**MAIL:** Law Access  
PO Box Z5345, Perth WA 6831

**EMAIL:** lawaccess@lawaccess.org.au

**ENQUIRIES:** (08) 6488 8725

**FAX:** (08) 9324 8699

**Please Note:** We prefer to receive applications by post or email. We recognise that this is not always possible for everyone and we will accept hand-delivered applications through the Law Society's reception at Level 4, 160 St George's Terrace, Perth WA 6000

## PERSONAL DETAILS

Title: \_\_\_\_\_ Mr \_\_\_\_\_ Mrs \_\_\_\_\_ Ms \_\_\_\_\_ Miss \_\_\_\_\_ Mx \_\_\_\_\_ N/A \_\_\_\_\_ Other (please specify) \_\_\_\_\_

Given Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

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

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_ Work: \_\_\_\_\_

Relationship Status: \_\_\_\_\_

Number of Dependents: \_\_\_\_\_

Are you Aboriginal or Torres Strait Islander? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Your date of birth: \_\_\_\_\_

Are there any circumstances facing you which make it more difficult for you to deal with this legal matter? (For example, a language barrier, a particular disability, experience of family violence, diverse sexuality or gender) You do not need to disclose these, but it will make it easier for us to assist you if we understand any difficulties you are facing.

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\_\_\_\_\_

Would you like to nominate a contact person to deal with this matter on your behalf? This means we will contact the nominated person instead of contacting you directly. If so, please provide their details:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## DETAILS OF MATTER

Please indicate the **type of legal problem(s)** from those listed below (please tick):

<input type="checkbox"/>	Criminal Law	<input type="checkbox"/>	Family Law – Children
<input type="checkbox"/>	Family Law – Property	<input type="checkbox"/>	Family Law – Care and Protection
<input type="checkbox"/>	Other civil law, please specify:		

How did you find out about Law Access? \_\_\_\_\_

Has a solicitor previously assisted you with this matter? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please provide their details: \_\_\_\_\_

Why are they no longer assisting you? \_\_\_\_\_

## DETAILS OF OTHER PARTY

Name of the other party: \_\_\_\_\_

Name of other party's solicitor (if any): \_\_\_\_\_

## COURT PROCEEDINGS

Are there any current court proceedings in relation to your matter? Yes No

*If there are current court proceedings, please supply copies of the latest Court/Tribunal orders or directions which indicate the nature and date of the next hearing date and type.*

Next court or tribunal date: \_\_\_\_\_

Court or tribunal name: \_\_\_\_\_

Type of proceeding (e.g. Hearing/Directions/Trial): \_\_\_\_\_

## LEGAL AID

Have you contacted Legal Aid for assistance? Yes No

Type of assistance? Legal Advice Duty Lawyer Other, please specify: \_\_\_\_\_

Have you been refused a grant Legal Aid for this matter? Yes No

If so, what reason is given on the refusal letter? Lack of merit Matter type not within Legal Aid's Guidelines Your financial situation

Have you appealed this decision? Yes No

What was the outcome? Granted Refused

\*Where appropriate, please attach a copy of Legal Aid's refusal letter.

## ASSISTANCE FROM OTHER LEGAL SERVICES

Have you sought assistance from other community legal services? Yes No

If so, please state which legal service: \_\_\_\_\_

What assistance did they provide you with? \_\_\_\_\_

Why are they unable to assist you further? Lack of merit Lack of resources Your financial situation

Other (please state) \_\_\_\_\_

## LAW ACCESS

Have you made an application to Law Access before? Yes No

If so, does this Application concern the same issue? Yes No

## YOUR FINANCIAL CIRCUMSTANCES

Are you currently employed? Yes No

If not, when did you last work in paid employment? \_\_\_\_\_

If yes, what capacity are you working? Casual / Full-Time Casual / Part-Time Permanent / Full-Time

Permanent / Part-Time Seasonal Other (please state) \_\_\_\_\_

Are you receiving any government benefits? \_\_\_\_\_

If yes, please specify the benefit you are receiving: \_\_\_\_\_

What was your taxable income in the last 12 months? \_\_\_\_\_

What is your current weekly income after tax? \_\_\_\_\_

Do you receive financial support from another person? e.g. If you are married Yes No

Please specify who you receive financial support from and their relationship to you: \_\_\_\_\_

What was their total taxable income in the last 12 months? \_\_\_\_\_

What is their current weekly income after tax? \_\_\_\_\_

## YOUR ASSETS & LIABILITIES

Please ensure all items are filled in (if you don't own an asset e.g. a house put "nil").  
Please also provide proof (e.g. a copy of the latest bank statement).

ASSET	Total value	Your share	Money owing	Monthly payments	Date payments will cease
House					
House Address					
Other Land					
Other Land Address					
Bank/Building Society					
Stocks & Shares					
Car					
Other Cash Or Investments					
Other Assets (give details)					
Other Liabilities (give details)					

## DETAILED STATEMENT REGARDING YOUR MATTER

Please include the following:

1. The **history** of the matter;
2. The **current situation**;
3. The **type of assistance** or outcome sought;
4. **Copies of relevant documentation** indexed in the following format:

Date created	Document name/Title	Written by	Written To

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(If you prefer, write 'PLEASE SEE ATTACHED' in the space above and attach a separate statement)

### PLEASE ALSO PROVIDE THE FOLLOWING:

\_\_\_\_\_ Court or other relevant documents.

\_\_\_\_\_ Relevant correspondence.

\_\_\_\_\_ Letter from Legal Aid refusing assistance.

\_\_\_\_\_ Copy of pension card or most recent payslip.

\_\_\_\_\_ Copy of most recent bank statement.

## PERMISSION TO SHARE INFORMATION

In order to make the provision of pro-bono services more efficient, Law Access Limited (known as Law Access) needs the ability to share information about your matter with other lawyers and legal organisations in some circumstances.

I, \_\_\_\_\_ (name) give my permission for Law Access to share with other lawyers, community legal centres and pro-bono organisations, my name and information about my case (including documents).

Signature:

Date:

## PERMISSION TO OBTAIN INFORMATION

I/We hereby **AUTHORISE** and **REQUEST** any lawyer who has acted for me/us, the Legal Aid Commission, the Legal Profession Complaints Committee and any Court or Tribunal to provide Law Access any information and documents it may request in order to assist Law Access to assess this Application.

Signature:

Date:

## ACKNOWLEDGMENT

I ACKNOWLEDGE that:

1. Law Access Limited (known as Law Access) does not grant assistance to applicants but merely acts as an intermediary between the public and the legal profession;
2. Law Access does not act as my/our solicitor.
3. I remain responsible for meeting all Court commitments or commencing all legal action within the statutory limits.
4. It is my responsibility to negotiate the terms upon which I engage any firm introduced to me by Law Access;
5. I am not relying upon Law Access Limited (known as Law Access) or its Principal Lawyer to provide legal advice or legal representation and no cause of action in negligence in respect of the provision of legal advice or representation arises from the consideration or processing of this Application.
6. **It is an offence to make a false statement in or in connection with this Application and that if I do I will be liable to prosecution.**

Signature:

Date: