



THE LAW SOCIETY
OF NEW SOUTH WALES
PRO BONO

The Law Society of NSW Pro Bono Scheme
APPLICATION FOR PRO BONO REFERRAL

To The Pro Bono Solicitor
Law Society of New South Wales
170 Phillip Street
Sydney NSW 2000
Ph: (02) 9926 0364
Fax: (02) 9231 5809

1. PERSONAL DETAILS: (please print clearly)

Mr/Mrs/Ms FIRST NAME: SURNAME: D.O.B:

Address:

..... Post Code:

Telephone: (W)

(H)

(Mobile)

Email Address:

Marital Status: single married defacto other (eg. separated).....

2. DETAILS OF YOUR MATTER:

Please indicate the type of problem from those within the Scheme's guidelines listed below (please tick):

- | | | |
|--|--|--|
| <input type="checkbox"/> Administrative Law | <input type="checkbox"/> Criminal Law | <input type="checkbox"/> Wills and Estates |
| <input type="checkbox"/> AVO (applications only) | <input type="checkbox"/> Debt and Credit | <input type="checkbox"/> Employment Law |
| <input type="checkbox"/> Family Law (children's issues only) | <input type="checkbox"/> Discrimination | <input type="checkbox"/> Tenancy matters |
| <input type="checkbox"/> Child Care and Protection | <input type="checkbox"/> Immigration | <input type="checkbox"/> Non – Profit Business Law |

(The Scheme accept applications outside of guidelines in exceptional circumstances only)

Other.....

Next Court Date:

Court Location:

Type of Proceedings: eg. hearing/directions etc:

Time limitations to lodge documents etc:

Name of other party:

Have you been refused Legal Aid and if so reason why?
(Please note: you must provide the refusal letter or the Legal Aid officer's name)

Have you been assisted by any agency or representative in this matter and if so who?

.....

Who referred you to the Pro Bono Scheme?

☐ **Legal Aid** Name of Legal Aid Officer:.....

☐ **Community Legal Centre** Name of centre and contact person:

☐ **Solicitor** Name and contact number.....

☐ **LawAccess** Name of LawAccess Officer:.....

☐ **Other (give details)**.....

Have you applied to the NSW Bar Association for assistance: YES / NO

If you wish another person or agent to be authorised to contact the Scheme on your behalf,

please supply their details:

(note that the staff of the Pro Bono Scheme are unable to discuss your matter with anyone other than yourself or an authorised person who may contact the Scheme on your behalf)

3. FINANCIAL DETAILS:

Average weekly income (after tax): \$

Your occupation/Source of income:

Average weekly income of spouse/partner (after tax): \$

Partner's occupation/Source of income:

Assets (eg house, car):

.....

.....

Liabilities/Outgoings/Debts (eg mortgage, credit card):

.....

.....

Children/ Dependants:.....

I am able to make a contribution towards legal fees YES / NO

If yes, indicate amount as lump sum or installments \$

(please note that your matter may be more easily referred to a pro bono solicitor if you are able to make some contribution towards legal fees)

It is very important that you provide the Pro Bono Scheme Solicitor with enough information to fully assess your application.

YOUR APPLICATION CANNOT BE ASSESSED UNLESS THE FOLLOWING INFORMATION HAS BEEN RECEIVED 2 WEEKS BEFORE ANY COURT DATE:

- **Detailed statement concerning the matter**
- **Court or other relevant documents**
- **Reasons for Legal Aid refusing assistance**
- **Copy of pension card or most recent payslip**
- **Copy of most recent bank statement**

DECLARATION

I/We the Applicant(s) certify that the above is true and correct and acknowledge the following:

- **the Pro Bono Scheme does not represent applicants but merely acts as a referral service between the public and legal practitioners.**
- **that I/we shall have no right of action against the Law Society of NSW or its employees in any event arising from this application or any assistance obtained from a firm referred from the Scheme.**
- **that I/We may not be eligible for assistance under the Scheme's guidelines or at the discretion of the Pro Bono Scheme Solicitor.**
- **in the event that an application is received from the other party, the Scheme will refer the matter for independent assessment to preserve privacy and avoid any conflict of interest.**
- **that it may not be possible to find the lawyer willing to do the work on the basis requested, or in the location or legal area concerned.**
- **that I/we have the right to request access to information held by the Scheme which relates to me/us.**
- **that my/our matter may require the assistance of a barrister.**
- **that information may be disclosed or sought from third parties such as the Law Society, Legal Aid, former Legal Representatives, a Court or Tribunal or the NSW Bar Association.**

PRINT NAME:

SIGNATURE: **Date:**