

# Application for grant of legal assistance

Please complete all questions on this form

This form does not contain all of the information you are required to provide when submitting your application for legal assistance. You may need to answer other questions or provide documents. If you have a lawyer assisting you with this application, ask them what additional information to include. Lawyers using this form should refer to the relevant ATLAS template.

## 1. Personal details

Title:  Mr  Mrs  Ms  Miss  Master  Dr  Mr/Mrs  Estate of  Mx

First name ..... Middle name .....

Last name .....

Gender:  Male  Female  Self-described .....  Trans or gender diverse  Prefer not to say

Date of birth ..... / ..... / ..... Is date of birth an estimate only?  Yes  No

Your home address (even if you are in custody) .....

.....

Your postal address (leave blank if same as home address) .....

.....

Are you homeless?  Yes  No

Would you prefer to be contacted by email?  Yes  No

Email address .....

Send all correspondence to your lawyer only?  Yes  No

Home phone ..... Mobile phone .....

Work phone ..... Other contact phone .....

## 2. Additional details

Have you used any other names with Victoria Legal Aid (VLA)?  Yes  No

If **yes**, please list any other name(s) used .....

## 3. Your background

Country of birth .....

If you were not born in Australia, which year did you arrive here? .....

Are you of Aboriginal or Torres Strait Islander origin?

No  Yes, Aboriginal  Yes, Torres Strait Islander  Yes, Aboriginal and Torres Strait Islander

## 4. Language

Do you speak a language other than English at home?  Yes  No (Go to [Question 5](#))

Which language? .....

How well do you speak English?  Very well  Well  Not well  Not at all

Do you need an interpreter?  Yes  No Which language? .....

## 5. Disability and mental health

Do you have a disability?  Yes  No (Go to [Question 6](#))  Not disclosed

What kind of disability? (you can select more than one)

- Acquired brain injury  Chronic illness (e.g. cancer, chronic fatigue, diabetes)  Deafblind  
 Developmental delay (in children)  Learning difficulty (including dyslexia)  
 Mental health issues (psychosocial)  Cognitive (including intellectual disability)  
 Speech and sensory  Blind or vision-impaired  Deaf or hearing-impaired  Physical  
 Neurological (e.g. Alzheimer's, Parkinson's, multiple sclerosis)  
 Neurodiverse (e.g. autism spectrum disorder, attention deficit hyperactivity disorder)

Other: .....

## 6. Employment status

What is your employment status?

- Full time  Part time  Casual  Not employed  Self-employed

## 7. Benefit details

Do you receive a Centrelink benefit or income support?  Yes  No (Go to [Question 8](#))

What is your Centrelink reference number? .....

What type of benefit do you receive?

- Abstudy\*  Age pension\*  Austudy\*  Carer payment\*  
 Disability support pension\*  Newstart allowance\*  Youth allowance\*  Parenting payment\*  
 Partner allowance\*  Sickness allowance\*  Special benefits\*  Veterans/war service  
 Widow allowance\*  Widow B pension\*  Wife pension\*  Other

If you receive one of the benefits **marked with an asterisk\***: Do you receive the maximum rate of benefit?  Yes  No

## 8. Custody details

Are you in custody or detention?  Yes  No (Go to [Question 9](#))

Custody/detention location .....

Date remanded into custody or detention \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Corrective services ID (not compulsory) .....

## 9. Relationship status

What is your relationship status?

- Single  Living with partner  Married  Separated from partner  
 Married but separated  Divorced  Widowed  Not applicable

## 10. Are you currently experiencing or fleeing family violence?

Yes  No

## 11. Partner details

In this form 'Partner' means spouse or defacto partner, where you have lived together in a genuine domestic relationship for at least 6 months.

The following are examples of when we don't consider you to have a partner for the purpose of the application for legal assistance:

- they have an opposing interest in your legal proceedings; or
- you have recently separated from them; or
- they live overseas and aren't earning income or don't have assets; or
- they are in prison or detention and don't have assets; or
- they have allegedly used family violence against you either in this matter or in the past; or
- you have allegedly used family violence against them either in this matter or in the past; or
- your relationship with them may be damaged if they knew about your legal issue.

Do you have a partner?  Yes  No

Does your partner receive a Centrelink benefit or income support?  Yes  No

If **yes**, what type of benefit do they receive?

- Abstudy\*  Age pension\*  Austudy\*  Carer payment\*  
 Disability support pension\*  Newstart allowance\*  Youth allowance\*  Parenting payment\*  
 Partner allowance\*  Sickness allowance\*  Special benefits\*  Veterans/war service  
 Widow allowance\*  Widow B pension\*  Wife pension\*  Other

If they receive one of the benefits **marked with an asterisk\***:

Do they receive the maximum rate of benefit?  Yes  No

## 12. Dependant details

In this form, 'dependant' means: A person who relies on you for financial support including children or elderly parents.

Do any dependants live with you?  Yes  No

When answering this question, you need to:

- list those people that are not listed as your partner in [Question 11](#); and
- include only those people who live with you.

Names of dependants:

First name	Last name	Relationship to you	Date of birth
			/ /
			/ /
			/ /
			/ /
			/ /
			/ /

Do you or your partner pay child support/maintenance?  Yes  No

How many children/maintenance dependants is the payment for? .....

### 13. Your income (before tax)

	You	Your partner	Frequency
Pensions/benefits/allowances (excluding Family Tax Benefit)			
Income – employment			
Business / self-employed			
Child support			
Other			
<b>Total income</b>			

### 14. Expenses

	You	Your partner	Frequency
Income tax			
Rent			
Mortgage			
Board			
Rates			
Business expenses			
Child care			
Child support / child maintenance / Spousal maintenance /			
<b>Total expenses</b>			

### 15. Assets

	You	Your partner
Home		
Home mortgage		
Other real estate		
Other mortgage		
Farm / business		
Farm / business mortgage		
Motor vehicle		
Motor vehicle loan		
Cash / savings		
Other assets ( <i>please specify</i> )		
<b>Total assets</b>		

Have any of your assets been seized, frozen or restrained by the police or the court?  Yes  No



Please provide copies of all relevant court orders. Please provide full details of the assets in the above table

## Business

Are you or your partner:

- Self employed  Yes  No      A partner or director in a business  Yes  No  
or company
- A shareholder in a private company  Yes  No
- Receiving money from a trust  Yes  No      Receiving any other benefit from  Yes  No  
a business or company

If **yes** to any of the above, please provide details .....



If you have any interest in a business or farm, you will need to provide profit and loss accounts for the past 12 months; tax returns for the last financial year; and bank statements for the past three months

## 16. Other parties

For some disputes (for example, a family law matter) VLA may use the information provided in this section to contact the other party to attempt appropriate dispute resolution.

Are there other parties to this matter?  Yes  No (Go to [Question 17](#))

If **yes**, specify whether the other party is:  A person  An institution

If the other party is an **institution**, please provide details:

Name of institution .....

If the other party is a **person**, please provide details:

Title:  Mr  Mrs  Ms  Miss  Master  Dr  Mr/Mrs  Estate of  Mx

First name ..... Middle name .....

Last name .....

Gender:  Male  Female  Self-described .....  Not applicable

Date of birth ..... / ..... / ..... Is date of birth an estimate only?  Yes  No

Phone ..... Mobile .....

Email address .....

Address .....

Please describe the other party's relationship to you:

- Spouse/partner  Child  Ex-spouse  Sibling  Grandparent  
 Grandchild  Parent  Co-accused  Other

Please describe the other party's role in these proceedings:

- Applicant/plaintiff/appellant  Accused/defendant/respondent  Interested party  
 No court proceedings  Other

## Details of other party's lawyer

Name of firm .....

Phone ..... Fax .....

Email address .....

Postal address .....

## 17. Court hearings

Are there any proceedings?  No (*Go to Question 18*)  Yes, current  Yes, intended

When is the next hearing date? ..... / ..... / .....

Which court/tribunal do you have to go to? .....

What is your role in these proceedings?

- Applicant/plaintiff/appellant  Accused/defendant/respondent  Interested party  
 No court proceedings  Other

What type of hearing is it?

- Appeal  Summary hearing  Indictable hearing  
 Family law hearing  Civil application  Mediation/alternative dispute resolution (ADR)  
 No hearing  Other (*please specify*) .....

Court proceedings number (*not mandatory*) .....

## 18. Payment of fees

Have you or any other person paid any of your legal fees for this case?  Yes  No

*If yes*, name of the person who paid the legal fees .....

Relationship to you ..... Amount paid .....

If another person has paid previous fees in this matter, please fully outline the reason why this person cannot continue to pay your legal costs:

.....  
.....  
.....



*Please provide copies of receipts and bank statements if you have paid any legal fees for this case*

## 19. Your lawyer

Who do you want as a lawyer? .....

Firm's name and details .....

.....  
.....

*If you have a lawyer assisting you with this application, we recommend that you ask the lawyer to submit the application on your behalf.*

## 20. Your legal problem

What type of law applies to your legal problem?

- Criminal law  Family law  Family violence  
 Civil law (*please specify, eg. inquest, discrimination*) .....

Are any of the following factors relevant to your legal problem?

- Family violence – victim/survivor  Family violence – alleged perpetrator  Ice  Alcohol  Drugs

## 21. Describe your legal problem

Please provide details of your legal problem:

*For criminal matters, please provide details of the charges; for family matters and family violence matters, please specify the issue(s), the background, and the orders being sought (eg. residence of children).*

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Please provide copies of any relevant documents

*If you have a lawyer that you wish to act on your behalf, Questions 21, 22, 23 and 24 must be completed by that lawyer. If you do not have a lawyer, you are not required to complete Questions 21, 22, 23 and 24.*

## 22. Please identify and address the VLA guideline under which assistance is being sought

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Help: please see the VLA Handbook at <http://handbook.vla.vic.gov.au>

## 23. Please set out the merits of the application

*(This question does not need to be completed in indictable matters)*

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## 24. Please outline the detriment to the applicant if this application is refused

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Help: please see the VLA Handbook at <http://handbook.vla.vic.gov.au>

## 25. Criminal prosecutions only

Do you have any prior convictions?  Yes  No

If **yes**, please outline .....

Year ..... Offence ..... Penalty .....



Please provide charge sheets, prosecution summary and conviction history sheets if available

## 26. Criminal appeals only

Do you wish to appeal a conviction?  Yes  No

Do you wish to appeal against a sentence?  Yes  No

Please provide details .....

Which court made the decision? .....

What was the date of the original decision? ..... / ..... / .....

## 27. Family law matters only (including child protection matters)

### Details of children

Are there any children relevant to your legal problem?  Yes  No

If **yes**, give details:

#### Child 1:

First name	Middle name	Last name	Male/female/other	
Date of birth		Relationship to you	Who does the child live with?	Since when?
/ /				/ /

#### Child 2:

First name	Middle name	Last name	Male/female/other	
Date of birth		Relationship to you	Who does the child live with?	Since when?
/ /				/ /

#### Child 3:

First name	Middle name	Last name	Male/female/other	
Date of birth		Relationship to you	Who does the child live with?	Since when?
/ /				/ /

#### Child 4:

First name	Middle name	Last name	Male/female/other	
Date of birth		Relationship to you	Who does the child live with?	Since when?
/ /				/ /



**Child 5:**

First name	Middle name	Last name	Male/female/other
Date of birth	Relationship to you	Who does the child live with?	Since when?
/ /			/ /

**Existing orders**


Are there any current family law or child orders in relation to this matter?  No  Yes, interim  Yes, final

If **yes**, date of order ..... / ..... / .....

Court or tribunal which made the order?

Children’s Court  Family Court  Federal Magistrates Court  Magistrates’ Court of Victoria

Type of order:  Family law  Child support  Family violence  Child welfare

 Please provide copies of these orders

**Details of dispute**

Did you live with the other party?  Yes  No

If **yes**: Date of marriage ..... / ..... / ..... Date de facto relationship started ..... / ..... / .....

Date of separation ..... / ..... / ..... Date of divorce ..... / ..... / .....

Have you attended family dispute resolution with a registered family dispute practitioner?  Yes  No

*VLA offers a service called Victoria Legal Aid Family Dispute Resolution Service. We usually require applicants for family law assistance to attend this service.*

If you do not wish to attend Victoria Legal Aid Family Dispute Resolution Service before starting court proceedings, please provide reasons as to why you consider the service is not appropriate:

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**Safety fears**

Do you fear for your safety?  Yes  No

Do you fear for the safety of the children?  Yes  No

Are there any current investigations about child abuse?  Yes  No

Is there a family violence order in place for your protection?

No  Yes, interim  Yes, final

Is there a family violence order in place for the protection of children relevant to these proceedings?

No  Yes, interim  Yes, final

If **yes**, what is your role in the family violence order for the protection of the children?

Applicant/plaintiff/appellant  Accused/defendant/respondent  Interested party

No court proceedings  Other

## 28. Applicant declaration

I, .....

of .....

- (i) acknowledge that it is an offence to:
- fail to disclose information required of me and which I know to be relevant to this application for legal assistance
  - provide false information to Victoria Legal Aid directly or via my legal practitioner in connection with this application for legal assistance
  - make a false statement either orally or in writing in relation to this application for legal assistance
- (ii) have received a copy of Victoria Legal Aid's privacy statement
- (iii) consent to the submission of the application for legal assistance by electronic means to Victoria Legal Aid via the ATLAS grants management system.

## Centrelink consent and authority

I, .....

Authorise:

- Victoria Legal Aid to use Centrelink Confirmation eServices to perform a Centrelink enquiry of my customer details and concession card status to enable the business to determine if I qualify for a concession, rebate or service
- Services Australia to provide the results of that enquiry to Victoria Legal Aid.

I understand that:

- Services Australia will disclose my personal information to Victoria Legal Aid including my name, address, payment status, payment type and amount to confirm my eligibility for legal assistance
- this consent, once signed, remains valid while I am a customer of Victoria Legal Aid unless I withdraw it by contacting Victoria Legal Aid or Services Australia
- I can obtain proof of my circumstances/details from Services Australia and provide it to Victoria Legal Aid so that my eligibility for legal assistance can be determined
- if I withdraw consent or do not alternatively provide proof of my circumstances/details, I may not be eligible for the grant of aid provide by Victoria Legal Aid.

Your signature ..... Date ..... / ..... / .....

**Note:** For applications completed by third parties (including practitioners) on behalf of an Applicant, Centrelink requires confirmation of identity.

Confirmation of the Applicant's identity was undertaken by ..... by way of:

- verbal communication
- written/electronic communication

## 29. Proof of means

*Please note, the means test does not apply if you are seeking a grant for a review of a crimes mental impairment matter; or seeking a grant for a war veteran's matter; or are 18 years or younger and are seeking a grant of a Children's Court or Commonwealth Family Law matter.*

Are you seeking a waiver of the obligation to provide proof of means?  Yes  No

*If yes, I seek a waiver on the following basis: (please tick whichever applies)*

- I am in custody or detention and have savings and investments less than or equal to \$1095
- I am in custody or detention and I am applying for assistance for a bail application
- I am in custody or detention and I am applying for assistance for a summary crime proceeding that will be heard and determined within seven days of the date of my application for legal assistance
- I am of Aboriginal or Torres Strait Islander origin