

1. Is your matter in Court today? No Yes

2. Your personal details

Title: Mr Ms Mrs Miss Other

First names:

Surname:

Alias or other name:

Date of birth: Age:

Gender: Male Female Not identified

3. Your contact details

Mobile:

Tick this box if it is **unsafe** for us to send you text messages:

Other phone:

Email:

Address:

Postcode:

Are you homeless or in temporary accommodation?

No Yes

Are you in custody/detention? No Yes

MIN: Location:

4. Your background

Are you Aboriginal and/or Torres Strait Islander?

No Yes – Aboriginal

Yes – Torres Strait Islander Yes – both

Country of birth if not Australia?

Year arrived?

Do you speak a language other than English at home?

No Yes, which language?

Do you need an interpreter?

No Yes, which language?

Are you an Australian citizen? No Yes

If no, are you a Permanent Resident? No Yes

If no, what visa?

5. Do you have a disability or mental health condition? **i**

No Yes Not stated

If you choose to tell us this, we will ask what supports you need to make our service work for you.

6. Are you experiencing or at risk of domestic and family violence? **i**

For example, has your partner, ex-partner or family member hit, slapped or threatened you? Or are you frightened of or controlled by them?

No Yes

Is there or has there been an AVO made for:

Your protection No Yes Not sure

Your child's protection No Yes Not sure

Is there or has there been an AVO against you for:

The other party's protection No Yes Not sure

Your child's protection No Yes Not sure

7. Your source of income

Are you employed?

No Full time Part time Casual

Do you receive a Centrelink benefit?

No Yes, type:

Are you on the maximum rate? No Yes

8. Details of your dependent children **i**

Do you have any dependent children?

No Yes, how many?

Do you pay child support or maintenance?

No Yes, for how many children?

9. Details of the children your legal problem refers to **i**

Child 1 Name:

Date of birth: Gender:

Other Parent's name:

Other Parent's date of birth:

Child 2 Name:

Date of birth: Gender:

Other Parent's name:

Other Parent's date of birth:

OFFICE USE ONLY:

Client ID: Client Disclosure Statement provided: No Yes Date: Location:

Child 3 Name:

Date of birth: Gender:
Other Parent's name:
Other Parent's date of birth:

Child 4 Name:

Date of birth: Gender:
Other Parent's name:
Other Parent's date of birth:

More than 4 children

10. Who is your legal problem with?

Name:
Address:

Date of birth:
Relationship to you:
Other interested parties:

Date of separation/divorce:

11. Consent to share my personal information

I agree that Legal Aid NSW can give the FASS social support service a copy of this application form which has my personal information. I agree to Legal Aid NSW receiving any information from the FASS social support service that will assist with my legal matter.

No Yes

12. Declaration and Privacy

I understand it is an offence to give false or misleading information.

I declare that to the best of my knowledge the information I have given is true and correct.

I understand that Legal Aid NSW collects my personal information to provide me with a legal service, ensure accountability for the assistance it provides and to plan and report on their services.

I understand this information is used and stored in accordance with NSW Privacy legislation and I can access further information about the Legal Aid NSW Privacy Policy at www.legalaid.nsw.gov.au or call 9219 5000.

Signature:

Date:

FOR THE SOLICITOR TO COMPLETE

If the client has a disability or mental health condition, then consider asking:

- Which of these categories best describe the client's disability/diagnosis?
 - Cognitive (includes intellectual, ASD, ABI, dementia etc.)
 - Mental health condition
 - Physical
 - Sensory/speech
 - Other:

• What supports does the client require? **i**

- Auslan interpreter
- Large print documents
- Plain English summary of advice
- Suitable communication (e.g. no phone calls, everything in writing):
- Support person present
- Other:

If the client is at risk of domestic and family violence, then consider asking:

- Has an AVO been made for the protection of the client or their children? No Yes
- Is it safe to contact the client by?

| | | | | | |
|--------|----|-----|--------|----|-----|
| SMS: | No | Yes | Email: | No | Yes |
| Phone: | No | Yes | Mail: | No | Yes |

- Is it safe to disclose the client's address?

No Yes
- Is there anything else we can do to keep the client safe (e.g. do they feel safe going to court?):

FOR THE SOLICITOR TO COMPLETE

Advice provided on statutory time limits (include relevant dates):

Instructions including background (employment, health, family, housing and antecedents) and other relevant subjective matters

FOR THE SOLICITOR TO COMPLETE

Client name:
Client ID:
Date of next appearance:

Primary matter (please specify):

FAMILY LAW

ADVO

ADVO (PINOP)

Court departure from assessment
Enforcement, stay & other

Children

Live with arrangements
Spend time with arrangements
Recovery order
Location order
Airport watchlist
Hague
Contravention
Enforcement
ICL
Forced Marriage
Medical Procedures

Other

Family Law – Other

CRIME

Domestic Violence

ADVO (Defendant)
Breach ADVO
DV assault with injury
DV common assault
Other DV related charges
Stalk / intimidate

Fraud / dishonesty

Fraud / dishonesty

Property

Property Settlement
Spouse maintenance
Enforcement, variation, other

Property damage

Other property damage offence

CIVIL

Centrelink

Divorce
Annulment

Centrelink debt
Rate of payment

Care & protection

Compulsory schooling order
Contact s86
Emergency C&P Order
Guardianship
Joinder
Pre-litigation intervention
Primary C&P order
Variation / Rescission

Debts/loans

Client owes a person money
Money owed to client

Housing

Evicted from private rental
Evicted from social housing
Other barrier to housing
Unclaimed goods
Waiting list for social housing

Adoption

Adoption

Injury / Victims Support

Victim of crime (VS) eligibility/application

Child Support & child maintenance

Appeal from AAT
Appeal to AAT
Child Support agreement
Child support application
Child support declaration

Police complaint/police powers

Police complaint

Visas / immigration

Family violence – partner visa
Partner visa
Other immigration matter

Service provided:

Adjournment/mention
Advice only
Conflict
Information only
Negotiation/Draft terms
Urgent hearing
Minor assistance

Facilitated referral

Additional minor assistance provided? Date:

Outcome:

Finalised
Advised
Adjourned
Interim order (by consent)
Interim order (contested)
Final order (by consent)
Final order (contested)

ADVO (varied)
Withdrawn
Dismissed
Referred
Sentenced
Other:

Results:

Solicitor's name:

Date:

This listing:

Date: Court:

Location:

Bench:

Other party /lawyer:

Client referred to:

Legal Aid NSW
Aboriginal Legal Service
Community Organisation
No Referral necessary
Law Society/Private Practitioner
Community Legal Centre
Court/Tribunal
Doctor/Health Professional
DV Unit
Family Relationship Centre
Financial Counsellor
Government Department
Law Access NSW
Library
Merit
Men's Behaviour Change Program
Nowhere to refer client to
Ombudsman
Police
Pro Bono
Women's Domestic Violence Court Advocacy Service
Disability Royal Commission
Disability Advocate
Interstate legal aid commission