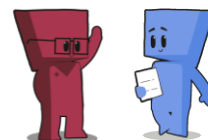


# Law Check-Up



## Client Referral Form

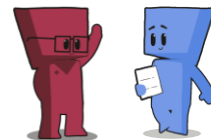
All information will be treated as confidential.

Referred to:	
Name	
Email address	
Date form completed	

Referred From:	
Name of organisation	
Address	
Your name	
Your phone number	
Your email	

Client Details			
Name Also known as (if applicable)			
Phone number		D.O.B.	
Email address			
Alternative contact details Name Phone number			
Address			
Best way to contact the client			
Safety issues to be aware of when contacting client			

Do you have a Court date?	
Name of Court	
Court Date	



## Tick boxes that apply to you



### Money

- Having trouble paying your fines?
- Having trouble paying a payday or fast loan?
- Being hassled by a debt collector?



### Consumer

- Signed a contract you can't afford?
- Someone owes you money?
- Not happy with goods or services you've paid for?
- Crashed your car and not insured?



### Centrelink

- In trouble with Centrelink?
- Centrelink said no to a pension or payment?



### Disability

- Having trouble getting the Disability Support Pension (DSP)?
- Trouble with the NDIS?
- Can't work anymore because sick or injured? Do you have superannuation?
- Has someone hurt you, treated you badly, refused to help or taken advantage of you?
  - Would you like to tell the Disability Royal Commission about it?



### Housing

- Worried about your housing?
- Can't get housing because something happened in a previous tenancy?
- Having problems with your neighbours?



### Violence

- Feeling unsafe at home or elsewhere?
- Are you a victim of crime? Want advice about victims support or compensation?
- Have you or someone you know been threatened with violence because of your race, religion, sexual orientation, gender identity or intersex or HIV/AIDS status?



### Children

- Has a Communities and Justice caseworker been in contact with you?
- In out of home care and need help with your placement or case worker?



### Family

- Separating and don't know what to do?
- Need help to see your kids or grandkids?
- Trouble getting or paying Child support?



### Discrimination, harassment and vilification

- Feel you've been discriminated against?
- Feel you're being harassed by someone?
- Have you been vilified?



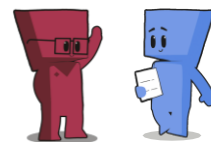
### Mental Health and Guardianship

- Need help with a Tribunal application?
- Unhappy with your Guardianship or Financial Manager?
- Worried about your Power of Attorney?



### Complaints about government authorities

- Got a complaint about a government department? Which one?
- Got a complaint about police?



## Tick boxes that apply to you



### Employment

- Hassles at work?
- Having trouble getting a job?
- Want advice about working with children or police checks or discrimination?



### Wills and Estate

- Need information about planning ahead – your will, power of attorney, guardian?
- Disputes after someone has died?



### Older People

- Feeling unsafe where you live?
- Money or property gone missing?
- Worried about your current living arrangements?



### Crime

- Do the police want to talk to you?
- Have to go to court?
- Traffic offender and want to get your driver licence back?



### Immigration

- Visa troubles?



### Military Veterans

- Having trouble with Department of Veteran's Affairs?
- Need help making a claim?
- Need help appealing a decision?



Which legal issue do you want help with first?



What services or supports do you have?



Any other information you think the lawyer needs to know?

## Client Consent:

I, \_\_\_\_\_ (client name)  
 consent to \_\_\_\_\_ (name of worker)  
 from \_\_\_\_\_ (name of referral organisation)  
 sharing my personal information with \_\_\_\_\_ (name of legal service)  
 about the legal problem(s) I ticked on this form. I agree the legal service can contact the referral  
 organisation if they need more information.

I agree the legal service can contact the referral organisation if they need more information. I  
 understand my personal information will be used to refer me for legal help

Client Signature

Date