

NO...../20.....

LEGAL AID ACT, 1985
APPLICATION FOR LEGAL AID
PART A (TO BE COMPLETED BY THE APPLICANT)

1. Name.....NIN NO

2. Address.....NIN NO OF SPOUSE

3. State whether;

Single

Married

Divorced

Widow

Widower

☐☐☐☐☐

4. Occupation:

☐
☐
☐

Self-Employed as:.....

Employed as:.....

Unemployed as:.....

5. Income including him/her spouse's income for the last month SR.....

6. Particulars of Payments

| | | SR | CTS |
|----|---|----|-----|
| A) | Income Tax or Profits | | |
| B) | Rent | | |
| C) | Social security contribution | | |
| D) | Life insurance Premiums | | |
| E) | Repayment of capital interest of loans | | |
| F) | Maintenance of dependents | | |
| G) | Any other payment of Reliabilities | | |
| H) | Any other significant expenses (please explain) | | |

7. Name, Age and relationships of his/her dependent

| | NAME | AGE | RELATIONSHIP TO APPLICANT |
|---|------|-----|---------------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |

8. List of assets of applicant and spouse (if applicable)

| APPLICANT'S ASSETS | | | | SPOUSE'S ASSETS | | | |
|---|--|-------|-----|---|--|-------|-----|
| E.g, House, Land, Furniture, vehicles, tools of trade | | VALUE | | E.g; House, Land Furniture, Vehicle, tools of trade | | VALUE | |
| | | SR | CTS | | | SR | CTS |
| 1 | | | | 1 | | | |
| 2 | | | | 2 | | | |
| 3 | | | | 3 | | | |
| 4 | | | | 4 | | | |
| 5 | | | | 5 | | | |
| 6 | | | | 6 | | | |
| 7 | | | | 7 | | | |
| 8 | | | | 8 | | | |
| 9 | | | | 9 | | | |
| 10 | | | | 10 | | | |

9. If the applicant is under 18years of age, whether parents or guardians willing and/ or able too divide legal aid at their expense

☐ YES

☐ NO

10. Nature of matter for which legal aid is sought:

11. Particulars of previous legal aid granted, if any:

Date: Signature of applicant:

PART B (TO BE COMPLETED BY THE REGISTRAR)

To the Hon:.....
The application conforms to rule 7 or rule 8 of the Legal Aid rules 1986 and appropriate documentary evidence has been obtained under rule 9(1) and is enclosed with this application submitted under rule 9(2) of the said Rules.

.....
Registrar

PART C (TO BE COMPLETED BY THE JUDGE)

(A) DIRECTIONS

(B) ORDER (GRANTING LEGAL AID)

Upon considering the application(s) made by.....of
.....for legal aid under the Act, I certify that
..... is entitled to legal aid under the Act. Legal aid granted for the
purposes of
..... Mr/Ms....., legal practitioner,
is assigned to provide legal aid under this certificate.

Dated this.....day of.....20.....

JUDGE'S COMMENTS

Date:..... Judge:.....

(C) ORDER (REFUSING LEGAL AID)

Upon considering the application made by.....
.....on.....day of.....20.....

I refuse legal aid for the following reason(s)

1.
.....
2.
.....

(d) IN THE CASE OF PROCEEDINGS BEFORE THE COURT OF APPEAL ON A REFUSAL BY A JUDGE
(in respect of cases in the court of Appeal. Section 9(2) of Legal Aid Act)

Having considered the application and the reasons given by the judge for refusing the granting of a certificate, I
here by grant/refuse legal aid to the applicant.

Date..... Justice of Appeal.....

E) ASSIGNMENT OF LEGAL PRACTITIONER

The applicant is granted the services of Mr/Mrs.....
Legal practitioner, for the purposes mentioned in the legal aid certificate.

Date..... Judge.....

f) DETERMINATION OF CONTRIBUTION TO THE LEGAL AID FUND (where applicable)

Determine that the applicant shall contribute SR.....to the legal aid fund.

Date..... Judge.....

PART D (FOR OFFICIAL USE ONLY)

| | SR | CTS |
|---|----|-----|
| A) Amount claimed by legal practitioner | | |
| B) Amount taxed by Registrar | | |

ACCOUNT OFFICER

Please pay SR.....to Mr/Ms....., legal practitioner, fees
In respect of the plaintiff/petitioner/defendant/respondent in case[.....]/20.....
..... V
Date..... Registrar.....

ACCOUNT SECTION

1. SR.....Paid on.....
To.....as fees.
2. Legal aid fund debited on.....
3. Amount recovered as contribution.....
4. Legal aid fund credited on.....