

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 18 years 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: _____

(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.....