

COMPLETE ALL QUESTIONS

1. Name Mr Ms Mrs Other (specify)

First names

Family name

Alias or other name

2. Age and gender Date of birth / /
Day Month Year

Age M F

3. Address

Are you homeless or in temporary accommodation?

Yes No

Email

4. Phone Home Work

Mobile Other

5. Background

Country of birth if not Australia

Year arrived in Australia

Are you Aboriginal and/or Torres Strait Islander?

No Yes, Aboriginal
 Yes, Torres Strait Islander Yes, both

Do you speak a language other than English at home?

Yes No

Which language?

6. Do you need an interpreter? Yes No

7. Do you have a disability? Yes No

If yes what is your disability:

Acquired brain injury Mental health condition
 Autism spectrum Physical impairment
 Chronic health condition Vision impairment
 Cognitive/intellectual Other (please specify)
 Hearing/speech impairment

What disability support do you need from us?

Auslan interpreter Large print documents
 Hearing loop Other (please specify)
 Wheelchair access

Are you an NDIS (National Disability Insurance Scheme) participant? Yes No

8. Are you experiencing or at risk of family violence (including from a former relationship)? Yes No

9. Are you employed?

Yes No Occupation

Full time Part time Casual

10. Centrelink

Do you receive a Centrelink benefit? Yes No

Type

Do you receive the maximum rate? Yes No

Card number

Card sighted: (office use only) Yes No

11. Living Arrangements

Single Married De facto Divorced
 Separated Widowed Other

12. Dependants

Is your partner dependent on you? Yes No

How many dependent children?

Do you have dependent children living with you? Yes No

13. Do you pay child support? Yes No

For how many children?

Privacy

Legal Aid NSW collects personal information from you to:

- provide you with a legal service
- ensure accountability for the assistance we have provided
- plan and report on our services.

The information is stored by us in accordance with NSW privacy legislation. You have a right to apply to access and correct the information we hold about you. For more information on our privacy obligations contact Legal Aid NSW PO Box K847, Haymarket NSW 1240, phone (02) 9219 5000.

Office use only

CASES matter number:

14.Income

What is your total **weekly** income before tax?

	You	Spouse/partner
Pension/benefit	\$ <input type="text"/>	\$ <input type="text"/>
Wages/salary	\$ <input type="text"/>	\$ <input type="text"/>
Business/self employed	\$ <input type="text"/>	\$ <input type="text"/>
Child support	\$ <input type="text"/>	\$ <input type="text"/>
Other	\$ <input type="text"/>	\$ <input type="text"/>

15.Housing and expenses

Board Rent Mortgage None Rates

How much do you pay per week? \$

Other expenses

	You	Spouse/partner
Tax	\$ <input type="text"/>	\$ <input type="text"/>
Child care	\$ <input type="text"/>	\$ <input type="text"/>
Child support	\$ <input type="text"/>	\$ <input type="text"/>

16.Assets

	You	Spouse/partner
Value of house/land	\$ <input type="text"/>	\$ <input type="text"/>
Less mortgage	\$ <input type="text"/>	\$ <input type="text"/>
Car	\$ <input type="text"/>	\$ <input type="text"/>
Cash, bank etc	\$ <input type="text"/>	\$ <input type="text"/>
Other	\$ <input type="text"/>	\$ <input type="text"/>

17.Children (Subject of court proceedings)

Name	Date of birth	Dependent on you?
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

18.How did you find out about Legal Aid?

Declaration

I understand that it is an offence to give false information.
I declare that to the best of my knowledge the information I have given is true and correct.

Signature

Date / /
Day Month Year

[REFER TO FRONT PAGE FOR PRIVACY INFORMATION](#)

For official use only—Solicitor to complete all information

Facts/Instructions

Instructions and legal advice

Solicitor to complete all information

Matter group: Care and protection

Matter types

- Primary care and protection order
- Variation/recission
- Breach undertakings/extend supervision
- Other post care order proceedings
- District Court appeal
- Supreme Court review

Listing/Assistance Date /
Day Month Year

- ECPO
- Adjournment/Mention
- Advice only
- Information only
- Negotiations/Consent orders
- Urgent interim hearing

Court type

Location

Bench

Short result

- ECPO made
- Appl for ECPO dismissed
- Adjourned
- Finalised

Adjourned date

Adjourned Court

Duty appearance decision

- Allowed
- Refused, means
- Refused, guidelines

Solicitor's name

Legal Aid NSW office/Firm name and address

 Postcode

Other parties/solicitors

Detailed results

Client referred to:

AUDIT
 This fully completed form must be retained for
 Legal Aid NSW audit purposes