APPLICATION FORM

LawRight **CANNOT** ASSIST IN **CRIMINAL** OR **FAMILY LAW MATTERS,** IN **COMPLEX COMMERCIAL DISPUTES, BUILDING AND CONSTRUCTION DISPUTES, PERSONAL INJURY** OR **NATIVE TITLE CLAIMS.**

LawRight is a community legal centre which coordinates the provision of pro bono assistance in civil law matters. Complete this form if you are seeking assistance through our Court & Tribunal Services, Duty Lawyer Service or Pro Bono Connect.

For more information about these and other LawRight services, please see the LawRight website at www.lawright.org.au.

To apply for assistance:

Step 1 Complete this application form if you are seeking free legal assistance with a civil law matter through the Court & Tribunal Services, Duty Lawyer Service or Pro Bono Connect. Please make sure you complete ALL applicable sections. **Please contact us if you need help to complete this form**. Visit our website on www.lawright.org.au for contact details and opening hours of each office.

Step 2 Return this form along with **photocopies** (not originals) of any supporting documents. In particular, if you are involved in litigation, please provide copies of any relevant court or tribunal documents.

- by post to **PO Box 12217 George Street QLD 4003**
- by fax to **(07) 3846 6311**
- by email to **admin@lawright.org.au**
- parties involved in litigation can hand their application to a LawRight staff member at the relevant court or tribunal office – see our website for contact details and opening hours of each office.

Step 3 LawRight will assess your application and contact you in writing or by telephone about how we can help. While LawRight tries to assess applications as quickly as possible, it may take us more than two weeks to get back to you.

LawRight will acknowledge receipt of your application by letter, email, or telephone call.

Time Limits

A limitation period may apply to your case. The processing of your application may take some time during which a limitation period may end. Even though you have applied to LawRight for assistance, we cannot be responsible if a limitation period ends while we are assessing your application.

To help us prioritise your application, please provide details of any known **deadlines, limitation dates or trial or hearing dates** for your proceedings.

Your Details

Given Name/s: _____
Family Name: _____
Are you known by any other/previous names? _____
Please tell us your full name so we can do a complete conflict of interest check.

Postal Address: _____
Suburb: _____
State: _____ **Postcode:** _____

Email: _____
Fax: _____
Primary Contact Number: _____
Additional Contact Number: _____

If you are an individual

Gender
☐ Male ☐ Female ☐ Other ☐ Prefer not to say ☐ Not listed: _____ (please describe (optional))

Date of birth: _____
Country of birth: _____

How well do you speak English?
☐ Very Well ☐ Well ☐ Not Well ☐ Not at all

How well do you write English?
☐ Very Well ☐ Well ☐ Not Well ☐ Not at all

What is your relationship status?
☐ Married or de facto ☐ Divorced ☐ Widowed ☐ Separated
☐ Never married ☐ Other (please specify):

Do you have any dependent children?
☐ Yes If yes, how many? _____
☐ No

Do you have any other dependents?
☐ Yes If yes, who and how many? _____
☐ No

What is your housing status?
☐ Renting ☐ Public Housing ☐ Rent free – family/friends ☐ Prison
☐ Own Home ☐ In hospital ☐ Sleeping rough (homeless, in vehicle, squatting etc.)
☐ Other (please specify): _____

Indigenous status
☐ No ☐ Yes, Aboriginal ☐ Yes, Torres Strait Islander ☐ Yes, both Aboriginal and Torres Strait Islander

Special circumstances

Do any of the following apply to you?
We ask for this information as it helps us to assess if you are eligible for assistance, if we can refer you to a specialist service and if we can put in place supports to help us help you. We understand that these are sensitive questions, and we treat this confidential information with care and respect.

☐ Experiencing family violence (from a carer, partner, or other family member)

☐ Mental health condition

☐ Disability or impairment. Please specify: _____

☐ Need an interpreter. Please specify language or non-spoken communication: _____

☐ Substance abuse problems

☐ Gambling addiction

☐ Living in a regional, remote, or rural area

☐ Over 65 years of age

Were you impacted by 2022 flooding in Queensland or by 2025 Cyclone Alfred?
☐Yes ☐No ☐Not sure

Here are some examples of how these disasters might have affected you:
- *Did you have to move or do repairs?*
- *Did you get less work or less income because of these disasters?*
- *Did you lose money because of these disasters?*
- *Did you have to help family and friends?*
- *Were you unable to access services that you would usually use?*
- *Was your health affected?*
- *Did it become too expensive to insure your home and contents?*

If yes or not sure, did the 2022 floods or Cyclone Alfred have an impact on your:
☐Housing ☐Family ☐Work ☐Financial position ☐Health ☐Insurance

If yes or not sure, did the 2022 floods or Cyclone Alfred affect the legal problem you are applying for?
☐Yes ☐No ☐Not sure

If you are an organisation

What is the organisation name? _____

Who is the organisation's contact person? _____

How many members does the organisation have? _____

Referral Information

Who referred you to LawRight? Please select one of the following:

☐ Federal Court (staff or judge)

☐ Queensland Court (staff or judge)

☐ Queensland Civil and Administrative Tribunal (staff or member)

☐ Other Court or Tribunal (please specify): _____

☐ Queensland Law Society / private lawyer or firm

☐ Bar Association of Queensland / barrister

☐ Legal Aid

☐ Community legal centre (including Indigenous legal service providers)

☐ Community non-legal support service

☐ Dispute resolution service

☐ Ombudsman

☐ Government entity (please specify): _____

☐ Internet search / LawRight website

☐ Other (please specify): _____

Your Financial Information

If you are an individual

Income source

☐ Full time employment ☐ Self-employed

☐ Part time employment ☐ Self-funded

☐ Casual employment ☐ Centrelink (please specify type of benefit): _____

What is your current *individual* annual income (before tax)? _____

What is your current *household's annual income (before tax)?** _____

*** Household** means you and other income earners with whom you live.

Do you receive financial support from any other person?

☐ No

☐ Yes (please provide details of your relationship with the person providing support and the amount of support provided): _____

Do you own any assets, either by yourself or jointly? (For example, a home, other real estate, motor vehicle, cash in bank accounts or trusts, shares, or other assets of a significant value)

If yes, please provide details of these assets.

Asset	Value ($)	Amount Owing ($)

Do you have any other debts? (For example, credit card debts, personal loans, bank loans)

☐ Yes (please provide details of these debts): _____

☐ No _____

If you are an organisation

What is the source and amount of your funding? _____

Please provide a current ASIC search or separate document listing current committee/board members or prospective members, a copy of your rules and a copy of your last annual report (if you have one). We cannot fully assess you application for eligibility until we have sufficient information about your organisation.

Current & Previous Legal Advisors (If Applicable)

Have you asked for or received legal advice for this matter? ☐ No ☐ Yes

If yes, **please provide** the details; if you received written legal advice on your issue, **please provide** copies of any relevant advice.

Name: _____

Firm/organisation: _____

Why is the firm/organisation not assisting you? _____

_____

_____

Current Proceedings (If Applicable)

Court or Tribunal:

☐ Queensland Court of Appeal ☐ Magistrates Court
☐ Supreme Court ☐ Federal Court
☐ District Court ☐ Federal Circuit Court
☐ Queensland Civil and Administrative Tribunal
☐ Other (please specify): _____

If your proceeding has been commenced, provide your file number: _____

Has a decision been made in your proceeding?

☐ No ☐ Yes (please provide a copy of the decision) *

*If you are involved in court or tribunal proceedings, we cannot fully assess your application for eligibility until will have received copies of all relevant court or tribunal documents.

Which party are you?

☐ Plaintiff / Applicant ☐ Defendant / Respondent ☐ Appellant ☐ N/A or unknown

Please list the names and details of the other people involved in your dispute:

Role	Name	Legal Representative	Relationship to You
Plaintiff/Applicant/Appellant			
Defendant/Respondent			
Other			
Other			

We need this information to complete a conflict of interest check. If you don't provide us with enough information about the other people involved, we may not be able to progress your application.

Your Legal Problem

Please briefly describe your legal problem and what assistance you require. If you do not provide us with sufficient information, we may not be able to assist you.

What are the relevant facts of your matter (including key dates, starting with the earliest date)?

What result are you seeking?

Is there anything else you consider relevant?

Privacy Collection Statement

LawRight is collecting your personal information in order to assess your eligibility for pro bono legal assistance. If you do not provide us with certain personal information (such as your contact details), we may not be able to progress this application.

LawRight may disclose your personal information to law firms and barristers that offer pro bono legal services so that they can make sure that they do not have a conflict of interest that would prevent them from assisting you. LawRight may also disclose your personal information to other organisations, such as Legal Aid Queensland or other community organisations to determine your eligibility for other forms of assistance.

We use third party service providers to store and process some personal information. These may include Australian and internationally-based technology service providers and the use of servers within and outside Australia, including in the USA, Luxembourg, Spain and Portugal.

Our privacy policy (available at www.lawright.org.au) has more information about how we deal with your information, how you can ask us to access or correct your information and our complaints process. If you have any questions about our privacy policy, you can contact us on (07) 3846 6317 or at admin@lawright.org.au.

Acknowledgement and Signature

I, (you, or an authorised person), confirm that:

- the information contained in this form is correct; and
- I have read and understood the above Privacy Collection Statement and agree to LawRight managing my personal information in accordance with this Statement and its privacy policy as amended from time to time.

I authorise LawRight to:

- assist me to collect and collate all facts and documents necessary (including sensitive information) to assess whether this matter complies with LawRight guidelines;
- request, transfer and receive personal information and documentation in relation to me for the purpose of providing assistance without waiving any legal professional privilege;
- use my personal information anonymously to compile statistical data for the purpose of analysing and evaluating LawRight services;
- give this information to member law firms and barristers and other organisations for the purpose of assessing my eligibility for assistance, providing assistance and reporting;
- keep any records related to my request for assistance or legal matter in electronic form only, including by scanning and confidentially destroying any physical documents LawRight creates or receives while assessing my matter or providing me with assistance; and
- destroy any documents related to legal work performed for me **7 years** after my file has been closed.

My authority continues until I withdraw it in writing.

I acknowledge that LawRight has no legal responsibility or liability to me where:

- my application is declined by LawRight; or

- my application is referred to a member law firm or barrister. In this case I authorise the member firm or barrister to report to LawRight on the progress and outcome of the matter on a confidential basis and without waiving any legal professional or other privilege, but to enable LawRight to monitor its referral program.

Signature: _____

Date: _____

This form was completed by:

☐ You ☐ Solicitor or barrister ☐ Community Legal Centre ☐ LawRight ☐ Legal Aid
☐ Other (please specify): _____

Relevant Documents and Checklist

Please attach **copies** of any documents, letters, files, agreements, contracts or reports which you think are relevant to your legal problem. It is particularly important that you provide us with **copies** of any court or tribunal documents which relate to your matter. Please attach **copies** not originals. If you do not provide us with the documents that we require, we may not be able to assist you. If you are involved in court or tribunal proceedings, we cannot fully assess your application for eligibility until will have received copies of all relevant court or tribunal documents.

Have you:

☐ Signed this form;
☐ If you are an organisation – provided a current ASIC search or separate document listing current committee/board members or prospective members, a copy of your rules and a copy of your last annual report (if you have one). We cannot fully assess you application for eligibility until we have sufficient information about your organisation;
☐ Provided copies of all relevant documents, including your court or tribunal documents.

Consent to Publish Story

Do you consent to LawRight publishing details of your story?
We may use your story to lobby government, educate the public and train staff of LawRight and other organisations. We will change names and other details so you and others involved cannot be identified.
Your consent is voluntary and you can withdraw it at anytime.

☐ Yes ☐ No