

**Application
form**

Legal Aid Ontario

**Lawyer Inmate Request Form
for Legal Aid Service**

Lawyer of choice

Name:

Phone:

Email:

Solicitor #:

Inmate information

Name:

Out of
custody/fixed
address:

Unit / apt #:

City:

Province:

Postal code:

Phone:

Email:

DOB:

Marital status:

Aboriginal self-identification

Do you self-
identify as First
Nations, Métis,
Inuit or other?

First Nations

Status

Non-status

On Reserve

Off Reserve

Métis

Registered

Non-registered

Inuit

Self-Identification of Race

Asian–East (e.g. Chinese, Japanese, Korean)	Latin American (e.g. Argentinian, Chilean, El Salvadorian)
Asian–South East (e.g. Malaysian, Filipino, Vietnamese)	Middle Eastern or North African (e.g. Egyptian, Iranian)
Asian–South (e.g. Indian, Pakistani, Sri Lankan)	Roma
Black–African (e.g. Ghanaian, Kenyan, Somali)	White–North American (e.g. American, Canadian)
Black–Caribbean (e.g. Barbadian, Jamaican)	Identified in Aboriginal Self Identifying Information above
Black–North American (e.g. American, Canadian)	Do not know
Indian–Caribbean (Guyanese with origins in India)	Not asked
Other	Prefer not to answer

Mental health issues

Yes	No
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Charges

Date of arrest:	Return date:	Court location:
Bail hearing: Yes	No	Bail status:
Plea: Yes	No	Other:
Charges:		
Institution:		

Financial

Funds seized: Annual income:
OW / ODSP: Yes No Income source:
Own property: Yes No Other assets:

If employed, what is the likelihood of returning to work if released?

Unable to obtain information from the applicant

Confirmation

I authorize the lawyer noted in section 1 to be my lawyer for the purposes of my Legal Aid Certificate.

I acknowledge that I am choosing my lawyer for my case. I understand that they will get a legal aid certificate and Legal Aid Ontario will pay for the services billed by the lawyer. I am prepared to work with my lawyer to manage my case.

A change of solicitor request will only be considered under extraordinary circumstances. It is expensive and costs LAO money to let you change lawyers.

Counsel, confirm with client that they agree to the terms and conditions. Verbal declaration is accepted for consent and declaration per COVID-19 disruptions. Client is advised of obligations to sign and submit consent and declaration at a later date.

Signature: Date:

Submit by email to: InmateLawyerApp@lao.on.ca

Personal information in this form is collected under the authority of section 84 of the Legal Aid Services Act and is used in the general administration of the payment of lawyers accounts including: case management, application of block fees and tariff, discretion, reviews, disbursement authorization, expedite requests, late billing, hard cap, and recoveries; and, is used in the panel management of lawyers including investigations, panel suspension, and panel removal. Questions about this collection should be directed to the FIPPA coordinator, 40 Dundas Street West, Suite 200, Toronto, ON, M5G 2H1, 416-979-1446 or 1-800-668-8258.